

Work Order ID 87817

Friday, July 13, 2012 1:29:49 PM

Ship Aug 3

\*87817\*

Page 1

Item ID: D4273-042

Accept

\*N9000040100\*

Setup Start

\*NS1\*

Revision ID:

Stop

\*NS2\*

Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 8/3/2012 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals:

Process Plan: ME

Date: 12-07-13 Tooling:

Date:

Run Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

D4273

D4279

B

100

Weld per dwg A/R S.S. rod Batch: 1118161 0.00

\*100\*

Large Fab

Memo

0.00

Large Fab

1- assemble ribs and handle plates ( DO NOT WELD HANDLE IN SECTION N-N ON PAGE 7 DWG D4273, NEED TO WELDED AFTHET MESH IS INSTALL) weld as per dwg D4273 using DT9610A

\*\*\*visual inspect before welding mesh\*\*\*

2- Cut D4279-1 (MADE ON THIS W/O) base mesh and tack weld all mesh on basket as per dwg D4273 and trim mesh to fit if necessary and trim to clear fasteners holes on the ends (D4279-5/-9)

3- weld hinge (3) and Mounting brackets as per dwg D3913

\*\*\*take lid to locate hinge and bracket\*\*\*

110

QC9- Inspect visual per QSI004- Fusion Welds 0.00

\*110\*

QC

Memo

0.00

Quality Control

12-07-31

DAS  
18  
9-89

12-07-31

**Work Order ID 87817****\*87817\***

Page 2

Friday, July 13, 2012 1:29:49 PM

Item ID: D4273-042

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 8/3/2012 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

| Tool ID | Tool # | Plan Code | Accept Qty | Reject Qty | Reject Number | Insp. Stamp |
|---------|--------|-----------|------------|------------|---------------|-------------|
|---------|--------|-----------|------------|------------|---------------|-------------|

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

125

Pressure Wash per QSI005 4.3

0.00

**\*125\***

HandFinish

Memo

0.00

Hand Finishing

1 7/6 12-8-1

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**\*87817\***

Page 3

Item ID: D4273-042

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 8/3/2012 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

130

White Gloss(Ref:4.3.5.2) per QSI005 4.3-Steel

0.00

**\*130\***

Powdercoat

Powder Coating

Memo

0.00

1- Plug holes and mask only interior of hinge (3) prior to powder coat

1ST COAT:

START TIME: 9:30OVEN TEMPERATURE: 400°FFINISH TIME: 10:00

\*\*\*\*\* 2nd coat if necessary\*\*\*\*\*

2ND COAT:

START TIME: \_\_\_\_\_

OVEN TEMPERATURE: \_\_\_\_\_

FINISH TIME: \_\_\_\_\_

IX

MA  
12/08/01

140

QC3- Inspect Part Finish

0.00

**\*140\***

QC

Quality Control

Memo

0.00

1 y f M 12/08/01

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| Root Cause                             | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling <input type="checkbox"/> |      |      |     |   |                   |                    |             |              |              |
| Operator <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Material <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Setup <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Other <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Process <input type="checkbox"/>       |      |      |     |   |                   |                    |             |              |              |
| Supplier <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Training <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Unapproved <input type="checkbox"/>    |      |      |     |   |                   |                    |             |              |              |

**FAULT CATEGORY**

|  |   |   |  |   |
|--|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |
|--|---|---|--|---|

**Work Order ID 87817**

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**\*87817\***

Page 4

Item ID: D4273-042

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 8/3/2012 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: Date:

Tooling: Date:

Run Start **\*NR1\***

QC: Date:

SPC (Y/N): Date:

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

150

Identify as per dwg & Stock Location: W10

0.00

D4272-0121 B87811

1x 6 Ml w/ log/oi

**\*150\***

Packaging

Memo

0.00

Packaging

160

QC21- Final Inspection - Work Order Release

0.00

**\*160\***

QC

Memo

0.00

Quality Control

12/8/3  
ML512 108/02

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
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| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

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| Operator <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Material <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Setup <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
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| Process <input type="checkbox"/>       |      |      |     |   |                   |                    |             |              |              |
| Supplier <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Training <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Unapproved <input type="checkbox"/>    |      |      |     |   |                   |                    |             |              |              |

**FAULT CATEGORY**

|   |   |   |  |   |
|---|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |
|---|---|---|--|---|

# Picklist Print

Friday, July 13, 2012 1:29:48 PM

Page 1

Work Order ID: 87817

Parent Item: D4273-042

Parent Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012

Required Date: 8/3/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 10.11.16 new issue DD ver:EC  
DWG REV.C DD ver:EC IPP Rev:C 11.03.03 AS PER DWG REV.D DD ver:EC  
IPP Rev:B 11.01.20 AS PER

| Component Item ID/<br>Item Name | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
|---------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|

M304EX0.75-16F  
Expanded Metal Flat SS

Purchased

No

100

sf

900.2085

26.195

26.195

4/2 23/5

12-07-30

Location

Loc Qty

Loc Code

WA

4.9094

121738

4.9094

WA035

895.2990637

117197

102.9036

120917

82.62533

121521

0.00013372

122080

139.02

122138

250.75

122315

320

D3913-1

Manufactured

No

100

Each

4.0000

1

1

Rib

Location

Loc Qty

Loc Code

WA

1

74145

0

80790

1

WA006

3

82917

3

687.542 -> ① PD 12-01-27

D3913-3

Manufactured

No

100

Each

7.0000

1

1

Rib

Location

Loc Qty

Loc Code

WA

6

69160

0

74144

0

84651

1

86140

5

WA006

1

69160

1

①

PD 12-01-27

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling <input type="checkbox"/>                       |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process <input type="checkbox"/>                             |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved <input type="checkbox"/>                          |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY  |   |   |  |   |
|---|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |



# Picklist Print

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Page 2

Work Order ID: 87817

Parent Item: D4273-042

Parent Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012

Required Date: 8/3/2012

Start Qty: 1.00

Required Qty: 1.00

D3913-9 Manufactured No 100 Each 7.0000 1 1  
Hinge Rib

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| WA       | 3       |          |
| 84814    | 2       |          |
| 85292    | 1       |          |
| WA006    | 4       |          |
| 70138    | 1       |          |
| 86313    | 3       |          |

D3916-5 Manufactured No 100 Each 5.0000 3 3  
Light Rib

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| WA       | 5       |          |
| 77142    | 1       |          |
| 82933    | 4       |          |

D4017-7 Manufactured No 100 Each 6.0000 1 1  
Rib

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| WA       | 1       |          |
| 82969    | 1       |          |
| WA005    | 5       |          |
| 69730    | 1       |          |
| 85435    | 4       |          |

D4277-3 Manufactured No 100 Each 0.0000 1 1  
Rib

D4277-5 Manufactured No 100 Each 8.0000 2 2  
Rib

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| WA       | 8       |          |
| 79347    | 8       |          |

D4277-9 Manufactured No 100 Each 0.0000 1 1  
Rib

PD 12-07-27

B85931 -> ③ PD 12-07-27

B87010 -> ① PD 12-07-27

B87819 -> ① PD 12-07-27

② PD 12-07-27

B86528 -> ① PD 12-07-27  
87813

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| Root Cause                             | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling <input type="checkbox"/> |      |      |     |   |                   |                    |             |              |              |
| Operator <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Material <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Setup <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Other <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Process <input type="checkbox"/>       |      |      |     |   |                   |                    |             |              |              |
| Supplier <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Training <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Unapproved <input type="checkbox"/>    |      |      |     |   |                   |                    |             |              |              |

**FAULT CATEGORY**

|   |   |   |
|---|---|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |
|   |   | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge  |
|   |   | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other   |

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Page 3

Work Order ID: 87817

Parent Item: D4273-042

Start Date: 7/16/2012

Required Date: 8/3/2012

Parent Item Name: Basket Base Assembly, RH

Start Qty: 1.00

Required Qty: 1.00

✓ D4277-19 Manufactured No 100 Each 0.0000  
Rib  
✓ D4278-041 Manufactured No 100 Each 2.0000  
Upper Rib Assembly-Hoop

B87822 → ① PD 12-01-27

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| BSK      | 1       |          |
| 84572    | 1       |          |
| WA       | 1       |          |
| 84348    | 1       |          |

B85029 → ① PD 12-01-27

D4278-045 Manufactured No 100 Each 0.0000  
Rib Assembly, Fwd Cham  
D4278-047 Manufactured No 100 Each 10.0000  
Upper Rib Assembly-Straight

B84567 → ② PD 12-01-27

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| WA       | 10      |          |
| 84823    | 10      |          |

① PD 12-01-27

D4306-1 Manufactured No 100 Each 7.0000  
Rib

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| WA       | 1       |          |
| 84351    | 1       |          |
| WA006    | 6       |          |
| 84652    | 6       |          |

PD 12-01-27

D4306-044 Manufactured No 100 Each 0.0000  
Rib Assembly, RH  
D4306-045 Manufactured No 100 Each 14.0000  
Rib Assembly

B87956 → ① PD 12-01-27

| Location | Loc Qty | Loc Code |
|----------|---------|----------|
| WA       | 2       |          |
| 84653    | 2       |          |
| WA006    | 12      |          |
| 75279    | 12      |          |

① PD 12-01-27

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |             |             |            |   |                          |   |                        |                     |                     |  |  |
|--|-------------|-------------|------------|---|--------------------------|---|------------------------|---------------------|---------------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |             |             |            | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                        |                     |                     |  |  |
| <b>Root Cause</b>  | <b>Date</b> | <b>Step</b> | <b>Qty</b> | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>   | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b> |  |  |
| Doc/Data <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Equip/Tooling <input type="checkbox"/>                       |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Operator <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Material <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Setup <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Other <input type="checkbox"/>                               |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Process <input type="checkbox"/>                             |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Supplier <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Training <input type="checkbox"/>                            |             |             |            |   |                          |   |                        |                     |                     |  |  |
| Unapproved <input type="checkbox"/>                          |             |             |            |   |                          |   |                        |                     |                     |  |  |

| FAULT CATEGORY  |   |   |  |   |
|---|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |

# Picklist Print

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Work Order ID: 87817

Parent Item: D4273-042

Parent Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012

Required Date: 8/3/2012

Start Qty: 1.00

Required Qty: 1.00

D2581

Manufactured No

100 Each 112.0000 2 2

Mounting Bracket

| <u>Location</u> | <u>Loc Qty</u> | <u>Loc Code</u> |
|-----------------|----------------|-----------------|
| WA              | 92             |                 |
| 82506           | 2              |                 |
| 83230           | 3              |                 |
| 85436           | 4              |                 |
| 85452           | 24             |                 |
| 86058           | 20             |                 |
| 86367           | 39             |                 |
| WA005           | 20             |                 |
| 70766           | 2              |                 |
| 81253           | 1              |                 |
| 82897           | 17             |                 |

②

PD 12-07-27

D3913-15

Manufactured No

100 Each 6.0000 1 1

Wide Handle Plate

| <u>Location</u> | <u>Loc Qty</u> | <u>Loc Code</u> |
|-----------------|----------------|-----------------|
| WA005           | 6              |                 |
| 86139           | 6              |                 |

B87867 -> ①

PD 12-07-27

D4016-1

Manufactured No

100 Each 7.0000 3 3

Hinge Half, Base

| <u>Location</u> | <u>Loc Qty</u> | <u>Loc Code</u> |
|-----------------|----------------|-----------------|
| WA              | 7              |                 |
| 66418           | 0              |                 |
| 85437           | 7              |                 |

B86166 -> ③

PD 12-07-27

D4021-1

Manufactured No

100 Each 9.0000 3 3

Handle Plate

| <u>Location</u> | <u>Loc Qty</u> | <u>Loc Code</u> |
|-----------------|----------------|-----------------|
| WA              | 9              |                 |
| 69518           | 0              |                 |
| 74316           | 0              |                 |
| 74946           | 0              |                 |
| 85785           | 9              |                 |

B87009 -> ③

PD 12-07-27

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| Root Cause    | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|---------------|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling |      |      |     |   |                   |                    |             |              |              |
| Operator      |      |      |     |   |                   |                    |             |              |              |
| Material      |      |      |     |   |                   |                    |             |              |              |
| Setup         |      |      |     |   |                   |                    |             |              |              |
| Other         |      |      |     |   |                   |                    |             |              |              |
| Process       |      |      |     |   |                   |                    |             |              |              |
| Supplier      |      |      |     |   |                   |                    |             |              |              |
| Training      |      |      |     |   |                   |                    |             |              |              |
| Unapproved    |      |      |     |   |                   |                    |             |              |              |

**FAULT CATEGORY**

| Landing Gear  | General                                 | Other  |
|---|---|--|
| <input type="checkbox"/> Bending                      | <input type="checkbox"/> Bend           | <input type="checkbox"/> Grain                           |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route      | <input type="checkbox"/> Hardware                        |
| <input type="checkbox"/> Cracks                       | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete           |
| <input type="checkbox"/> Crushed/Crimped.             | <input type="checkbox"/> Burrs          | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs                        | <input type="checkbox"/> Contamination  | <input type="checkbox"/> Maintenance                     |
| <input type="checkbox"/> Heat Treat                   | <input type="checkbox"/> Countersink    | <input type="checkbox"/> Mislabeled                      |
| <input type="checkbox"/> Inspection Strip in Tube     | <input type="checkbox"/> Cut Too Short  | <input type="checkbox"/> Misread                         |
| <input type="checkbox"/> Ripples in Bend              | <input type="checkbox"/> Drill Holes    | <input type="checkbox"/> Offset                          |
| <input type="checkbox"/> Torque Waves in Extrusion    | <input type="checkbox"/> Drawing        | <input type="checkbox"/> Out of Calibration              |
| <input type="checkbox"/> Turning Sequence             | <input type="checkbox"/> Finish         | <input type="checkbox"/> Out of Sequence                 |
| <input type="checkbox"/> Wave/Twist in Tube           | <input type="checkbox"/> Folio          | <input type="checkbox"/> Outside Dimensions              |
|   |   | <input type="checkbox"/> Ovalized                        |
|   |   | <input type="checkbox"/> Over/Under tolerance            |
|   |   | <input type="checkbox"/> Part Incorrect                  |
|   |   | <input type="checkbox"/> Part Lost/Missing               |
|   |   | <input type="checkbox"/> Part Moved                      |
|   |   | <input type="checkbox"/> Positioned Wrong                |
|   |   | <input type="checkbox"/> Power Loss/Surge                |
|   |   | <input type="checkbox"/> Pressure/Forced                 |
|   |   | <input type="checkbox"/> Temperature/Cure                |
|   |   | <input type="checkbox"/> Weld                            |
|   |   | <input type="checkbox"/> Wrong Stock Pulled              |
|   |   | <input type="checkbox"/> Other                           |

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Work Order ID: 87817

Parent Item: D4273-042

Parent Item Name: Basket Base Assembly, RH

Start Date: 7/16/2012

Required Date: 8/3/2012

Start Qty: 1.00

Required Qty: 1.00

D4279-3 Manufactured No 100 Each 1.0000  
Mesh, Chamfer

Location Loc Qty Loc Code

WA 1  
85557 1

B87725 → ① PD 12-07-27

D4279-5 Manufactured No 100 Each 1.0000  
End Mesh, Basket

Location Loc Qty Loc Code

WA 1  
84347 1

B87772  
B87772 → ① PD 12-07-27

D4279-7 Manufactured No 100 Each 9.0000  
End Mesh, Basket

Location Loc Qty Loc Code

WA 9  
79346 1  
86148 8

2 2 B87772

D4279-9 Manufactured No 100 Each 2.0000  
End Mesh, Basket

Location Loc Qty Loc Code

WA 2  
73265 0  
84349 2

① ② PD 12-07-27

D4279-11 Manufactured No 100 Each 0.0000  
Mesh, Base

B87772 → ① PD 12-07-27  
B87731

B87774 12.08.02

X D4672-1

2x  
ECN12611  
W

B87914 → 2x 12.07.31

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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

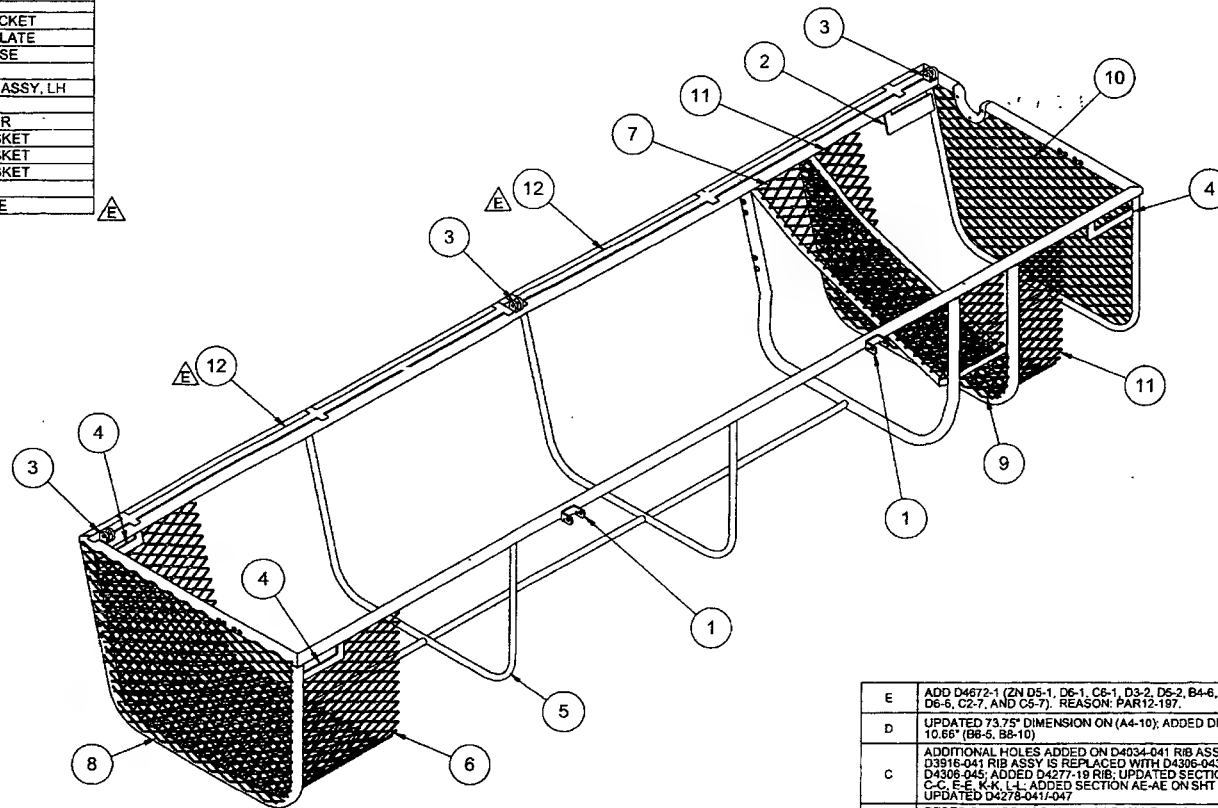
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                      |   |                |              |              |  |  |
|--|------|------|-----|---|----------------------|---|----------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector |  |  |
| Doc/Data <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Equip/Tooling <input type="checkbox"/>                       |      |      |     |   |                      |   |                |              |              |  |  |
| Operator <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Material <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Setup <input type="checkbox"/>                               |      |      |     |   |                      |   |                |              |              |  |  |
| Other <input type="checkbox"/>                               |      |      |     |   |                      |   |                |              |              |  |  |
| Process <input type="checkbox"/>                             |      |      |     |   |                      |   |                |              |              |  |  |
| Supplier <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Training <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Unapproved <input type="checkbox"/>                          |      |      |     |   |                      |   |                |              |              |  |  |

| FAULT CATEGORY  |   |   |  |   |
|---|---|---|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |



| ITEM | QTY | PART NUMBER | DESCRIPTION           |
|------|-----|-------------|-----------------------|
|      | X   | D4273-041   | BASKET BASE ASSY, LH  |
| 1    | 2   | D2581       | MOUNTING BRACKET      |
| 2    | 1   | D3913-15    | WIDE HANDLE PLATE     |
| 3    | 3   | D4016-1     | HINGE HALF, BASE      |
| 4    | 3   | D4021-1     | HANDLE PLATE          |
| 5    | 1   | D4273-141   | BASKET FRAME ASSY, LH |
| 6    | 1   | D4279-1     | MESH - BASE           |
| 7    | 1   | D4279-3     | MESH - CHAMFER        |
| 8    | 1   | D4279-5     | END MESH, BASKET      |
| 9    | 2   | D4279-7     | END MESH, BASKET      |
| 10   | 1   | D4279-9     | END MESH, BASKET      |
| 11   | 1   | D4279-11    | MESH - BASE           |
| 12   | 2   | D4672-1     | BLANKING PLATE        |



**D4273-041 BASKET BASE ASSY, LH**  
(MESH SHOWN LOCALLY FOR CLARITY)

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: POWDER COAT WHITE (4.3.5.2) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 45 lbs APPROX
- 8) WELD PER DART QSI 004
- 9) MASK HOLES PRIOR TO POWDER COAT
- 10) TRIM AS NECESSARY TO CLEAR FASTENERS/STRUCTURE.

*10087817*

**RELEASED**  
2012-07-12  
PCN 12-61

|           |   |   |          |
|-----------|---|---|----------|
| E         | ADD D4672-1 (ZN D5-1, D6-1, C6-1, D3-2, D5-2, B4-6, C3-6, D6-6, C2-7, AND C5-7). REASON: PAR12-197.   | MB  | 12.06.18 |
| D         | UPDATED 73.75" DIMENSION ON (A4-10); ADDED DIM 10.66" (B8-5, B8-10)   | SC  | 11.02.09 |
| C         | ADDITIONAL HOLES ADDED ON D4034-041 RIB ASSY; D3916-041 RIB ASSY IS REPLACED WITH D4306-043-044 & D4306-045; ADDED D4277-19 RIB; UPDATED SECTION B-B, C-C, E-E, K-K, L-L; ADDED SECTION AE-AE ON SHT 2; UPDATED D4278-041-047           | SC  | 10.12.23 |
| B         | REDESIGN: ADD (1) D4021-1, (1) D4279-7, (1) D4279-11 (D6-1, D6-9), RMV D4277-17, D4278-043 (SHT 4, 9), ADD (1) D3916-1, (2) D4277-5, (1) D4277-9, (1) D4306-1 (D6-4, D6-9), RMV (1) D4277-3 (D6-4, D6-9); 24.25 WAS 20.25 (A5-5, A5-10) | CP  | 10.11.30 |
| A         | NEW ISSUE   | SC  | 10.11.25 |
| REV.      | DESCRIPTION   | BY  | DATE     |
| DESIGN    | JRH   | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA<br>DRAWING NO. <b>D4273</b> REV. E SHEET 1 OF 10<br>TITLE <b>BASKET BASE ASSY</b> SCALE NTS<br><small>COPYRIGHT © 2010 BY DART AEROSPACE LTD<br/> THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> |          |
| DRAWN     | JRH   |   |          |
| CHECKED   | AP  |   |          |
| MFG. APPR | JRH   |   |          |
| DE APPR.  | JRH   |   |          |
| DATE      | 12.06.18  |   |          |

NCR: Yes / No

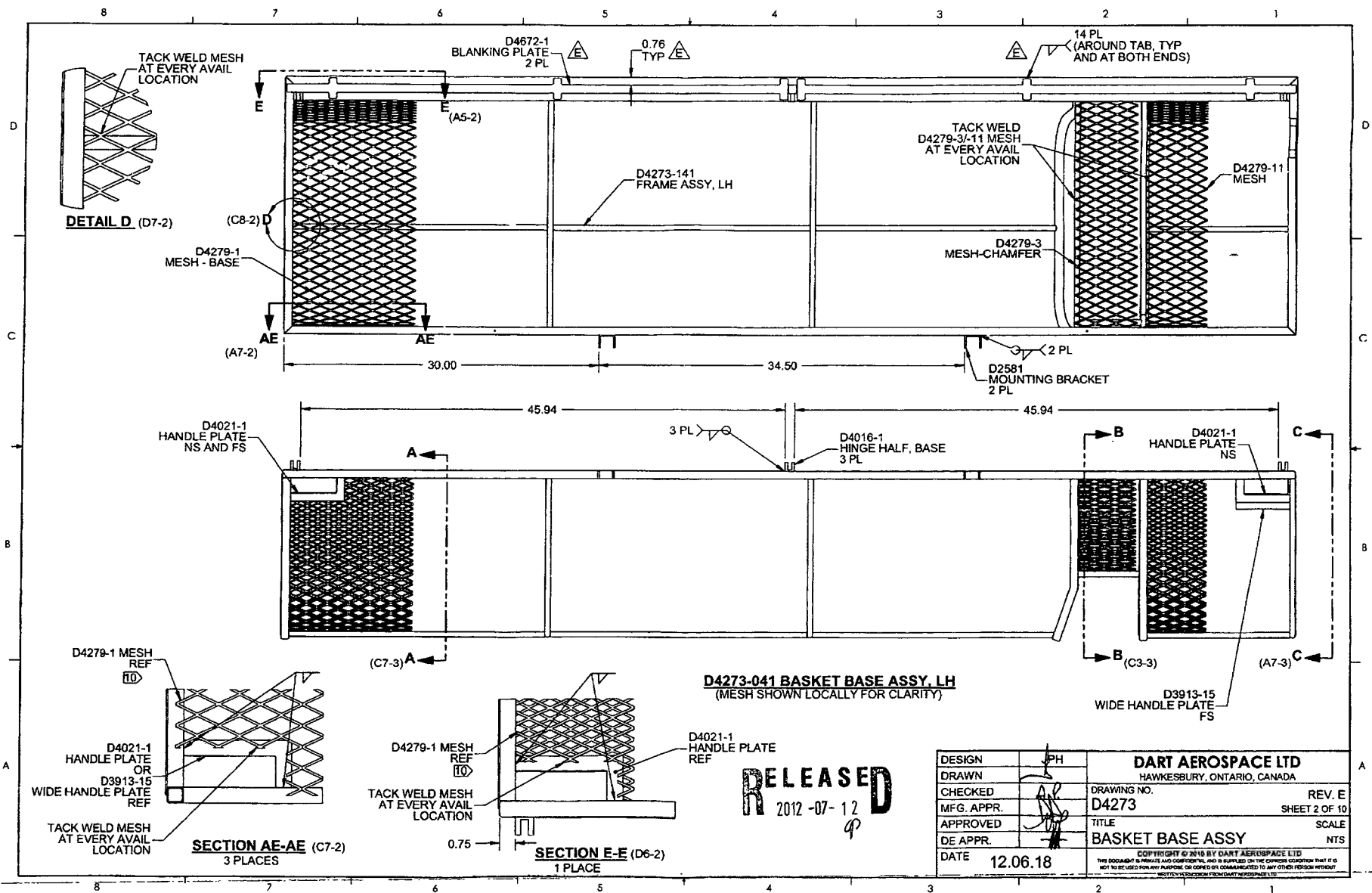
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|------------------------------------|--|--------------------------------------|---|----------------------|--|----------------|--------------|--------------|--|--|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |                                    |  |                                      | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                |              |              |  |  | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/> |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>     |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>       |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Root Cause</b>  | Date                               | Step   | Qty                                  | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description  | Sign &<br>Date | Verification | QC Inspector |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>                       |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Operator <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Setup <input type="checkbox"/>                               |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Other <input type="checkbox"/>                               |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Process <input type="checkbox"/>                             |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Supplier <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Training <input type="checkbox"/>                            |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Unapproved <input type="checkbox"/>                          |                                    |  |                                      |   |                      |  |                |              |              |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| FAULT CATEGORY  |   |  |   |   |  |  |  |  |  |
|---|---|--|---|---|--|--|--|--|--|
| <b>Landing Gear</b>                                   |   |  | <b>General</b>                                |   |  |  |  |  |  |
| <input type="checkbox"/> Bending                      | <input type="checkbox"/> Bend           | <input type="checkbox"/> Grain                           | <input type="checkbox"/> Ovalized             | <input type="checkbox"/> Pressure/Forced    |  |  |  |  |  |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route      | <input type="checkbox"/> Hardware                        | <input type="checkbox"/> Over/Under tolerance | <input type="checkbox"/> Temperature/Cure   |  |  |  |  |  |
| <input type="checkbox"/> Cracks                       | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete           | <input type="checkbox"/> Part Incorrect       | <input type="checkbox"/> Weld               |  |  |  |  |  |
| <input type="checkbox"/> Crushed/Crimped.             | <input type="checkbox"/> Burrs          | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing    | <input type="checkbox"/> Wrong Stock Pulled |  |  |  |  |  |
| <input type="checkbox"/> Cuffs                        | <input type="checkbox"/> Contamination  | <input type="checkbox"/> Maintenance                     | <input type="checkbox"/> Part Moved           |   |  |  |  |  |  |
| <input type="checkbox"/> Heat Treat                   | <input type="checkbox"/> Countersink    | <input type="checkbox"/> Misabeled                       | <input type="checkbox"/> Positioned Wrong     |   |  |  |  |  |  |
| <input type="checkbox"/> Inspection Strip in Tube     | <input type="checkbox"/> Cut Too Short  | <input type="checkbox"/> Misread                         | <input type="checkbox"/> Power Loss/Surge     | <input type="checkbox"/> Other              |  |  |  |  |  |
| <input type="checkbox"/> Ripples in Bend              | <input type="checkbox"/> Drill Holes    | <input type="checkbox"/> Offset                          |   |   |  |  |  |  |  |
| <input type="checkbox"/> Torque Waves in Extrusion    | <input type="checkbox"/> Drawing        | <input type="checkbox"/> Out of Calibration              |   |   |  |  |  |  |  |
| <input type="checkbox"/> Turning Sequence             | <input type="checkbox"/> Finish         | <input type="checkbox"/> Out of Sequence                 |   |   |  |  |  |  |  |
| <input type="checkbox"/> Wave/Twist in Tube           | <input type="checkbox"/> Folio          | <input type="checkbox"/> Outside Dimensions              |   |   |  |  |  |  |  |



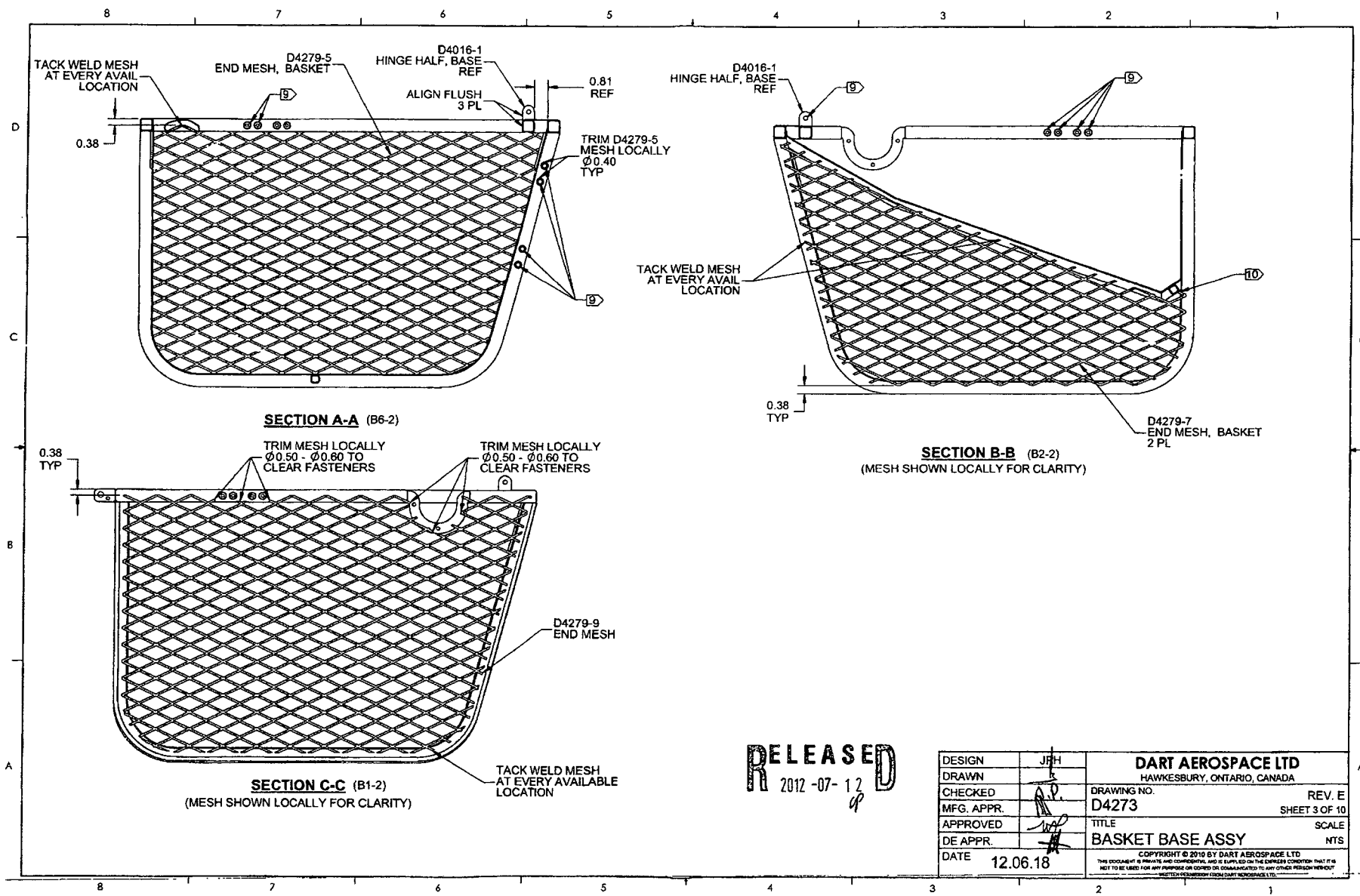
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                   |   |             |              |  |  |   |
|--|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |  |  |   |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector   |  |   |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |
| Operator <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |
| Material <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |
| Setup <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |
| Other <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |
| Process <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |
| Supplier <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |
| Training <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                   |   |             |              |  |  |   |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |



RELEASED  
2012-07-12

|  |          |  |               |
|--|----------|--|---------------|
| DESIGN   | JFH      | <b>DART AEROSPACE LTD</b>              |               |
| DRAWN  |          | HAWKESBURY, ONTARIO, CANADA            |               |
| CHECKED  |          | DRAWING NO.                            | REV. E        |
| MFG. APPR.   |          | D4273                                  | SHEET 3 OF 10 |
| APPROVED   |          | TITLE                                  | SCALE         |
| DE APPR.   |          | BASKET BASE ASSY                       | NTS           |
| DATE   | 12.06.18 | COPYRIGHT © 2010 BY DART AEROSPACE LTD |               |
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NCR: Yes / No

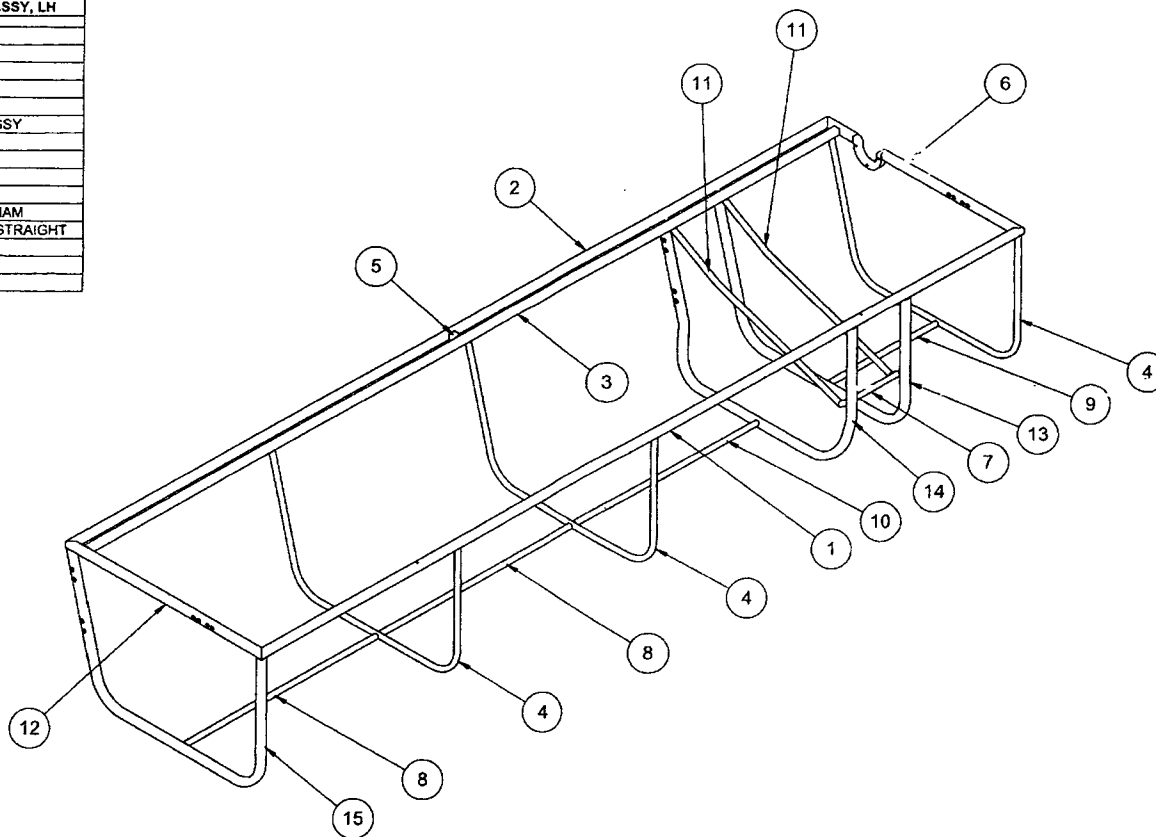
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|---|------------------------------------|--|---|---|-------------------|--|-------------|--------------|--|--|---|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____  |                                    |  |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |             |              |  |  |   | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>  | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/>  |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>  | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>  |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>  | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>  |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>  | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Root Cause</b>   | Date                               | Step   | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description   | Sign & Date | Verification | QC Inspector   |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>  |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Operator <input type="checkbox"/>   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Setup <input type="checkbox"/>  |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Other <input type="checkbox"/>  |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Process <input type="checkbox"/>  |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Supplier <input type="checkbox"/>   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Training <input type="checkbox"/>   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Unapproved <input type="checkbox"/>   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>FAULT CATEGORY</b>   |                                    |  |   |   |                   |  |             |              |  |  |   |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |                                    |  | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions  |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| ITEM | QTY | PART NUMBER | DESCRIPTION             |
|------|-----|-------------|-------------------------|
|      | X   | D4273-141   | BASKET FRAME ASSY, LH   |
| 1    | 1   | D3913-1     | RIB                     |
| 2    | 1   | D3913-3     | RIB                     |
| 3    | 1   | D3913-9     | HINGE RIB               |
| 4    | 3   | D3916-5     | LIGHT RIB               |
| 5    | 1   | D4017-7     | RIB                     |
| 6    | 1   | D4034-041   | AFT UPPER RIB ASSY      |
| 7    | 1   | D4277-3     | RIB                     |
| 8    | 2   | D4277-5     | RIB                     |
| 9    | 1   | D4277-9     | RIB                     |
| 10   | 1   | D4277-19    | RIB                     |
| 11   | 2   | D4278-045   | RIB ASSY, FWD CHAM      |
| 12   | 1   | D4278-047   | UPPER RIB ASSY-STRAIGHT |
| 13   | 1   | D4306-1     | RIB                     |
| 14   | 1   | D4306-043   | RIB ASSY, LH            |
| 15   | 1   | D4306-045   | RIB ASSY                |



**D4273-141 BASKET FRAME ASSY, LH**

**RELEASED**  
2012-07-12  
up

|  |          |                               |
|--|----------|-------------------------------|
| DESIGN   | JRH      | <b>DART AEROSPACE LTD</b>     |
| DRAWN  |          | HAWKESBURY, ONTARIO, CANADA   |
| CHECKED  | AP       | DRAWING NO. <b>D4273</b>      |
| MFG. APPR  |          | REV. E                        |
| APPROVED   |          | SHEET 4 OF 10                 |
| DE APPR.   |          | TITLE <b>BASKET BASE ASSY</b> |
| DATE   | 12.06.18 | SCALE <b>NTS</b>              |
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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

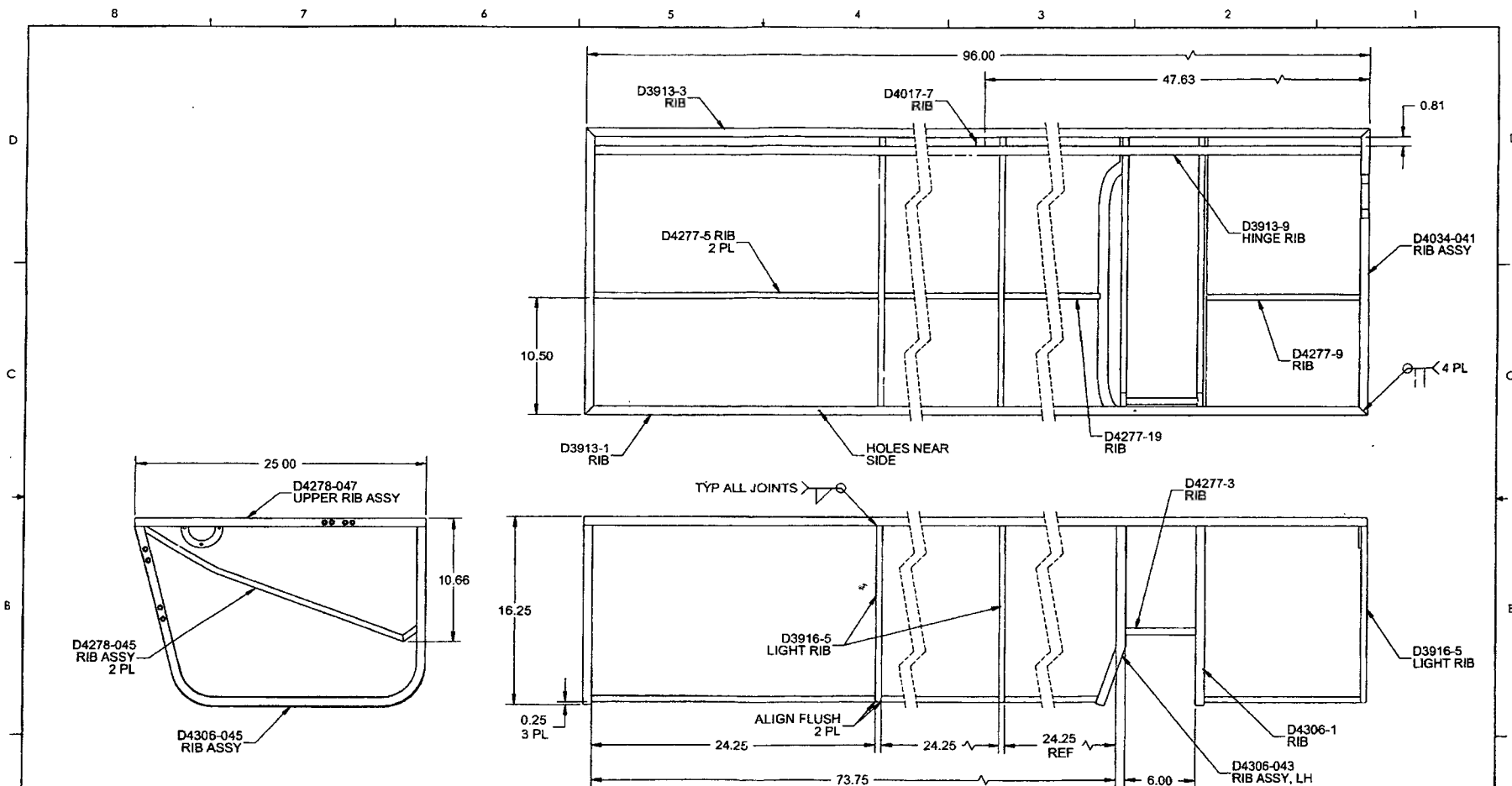
DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                   |   |             |              |              |  |  |
|--|------|------|-----|---|-------------------|---|-------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector |  |  |
| Doc/Data   |      |      |     |   |                   |   |             |              |              |  |  |
| Equip/Tooling  |      |      |     |   |                   |   |             |              |              |  |  |
| Operator   |      |      |     |   |                   |   |             |              |              |  |  |
| Material   |      |      |     |   |                   |   |             |              |              |  |  |
| Setup  |      |      |     |   |                   |   |             |              |              |  |  |
| Other  |      |      |     |   |                   |   |             |              |              |  |  |
| Process  |      |      |     |   |                   |   |             |              |              |  |  |
| Supplier   |      |      |     |   |                   |   |             |              |              |  |  |
| Training   |      |      |     |   |                   |   |             |              |              |  |  |
| Unapproved   |      |      |     |   |                   |   |             |              |              |  |  |

| FAULT CATEGORY           |                              |                          |                |                          |                                 |                          |                      |                          |                    |
|--------------------------|------------------------------|--------------------------|----------------|--------------------------|---------------------------------|--------------------------|----------------------|--------------------------|--------------------|
| <b>Landing Gear</b>      |                              |                          | <b>General</b> |                          |                                 |                          |                      |                          |                    |
| <input type="checkbox"/> | Bending                      | <input type="checkbox"/> | Bend           | <input type="checkbox"/> | Grain                           | <input type="checkbox"/> | Ovalized             | <input type="checkbox"/> | Pressure/Forced    |
| <input type="checkbox"/> | Centre Not Concentric to O/S | <input type="checkbox"/> | BOM/Route      | <input type="checkbox"/> | Hardware                        | <input type="checkbox"/> | Over/Under tolerance | <input type="checkbox"/> | Temperature/Cure   |
| <input type="checkbox"/> | Cracks                       | <input type="checkbox"/> | Broken/Damaged | <input type="checkbox"/> | Inspection Incomplete           | <input type="checkbox"/> | Part Incorrect       | <input type="checkbox"/> | Weld               |
| <input type="checkbox"/> | Crushed/Crimped.             | <input type="checkbox"/> | Burrs          | <input type="checkbox"/> | Instructions Incomplete/Unclear | <input type="checkbox"/> | Part Lost/Missing    | <input type="checkbox"/> | Wrong Stock Pulled |
| <input type="checkbox"/> | Cuffs                        | <input type="checkbox"/> | Contamination  | <input type="checkbox"/> | Maintenance                     | <input type="checkbox"/> | Part Moved           | <input type="checkbox"/> | Other              |
| <input type="checkbox"/> | Heat Treat                   | <input type="checkbox"/> | Countersink    | <input type="checkbox"/> | Mislabeled                      | <input type="checkbox"/> | Positioned Wrong     |                          |                    |
| <input type="checkbox"/> | Inspection Strip in Tube     | <input type="checkbox"/> | Cut Too Short  | <input type="checkbox"/> | Misread                         | <input type="checkbox"/> | Power Loss/Surge     |                          |                    |
| <input type="checkbox"/> | Ripples in Bend              | <input type="checkbox"/> | Drill Holes    | <input type="checkbox"/> | Offset                          |                          |                      |                          |                    |
| <input type="checkbox"/> | Torque Waves in Extrusion    | <input type="checkbox"/> | Drawing        | <input type="checkbox"/> | Out of Calibration              |                          |                      |                          |                    |
| <input type="checkbox"/> | Turning Sequence             | <input type="checkbox"/> | Finish         | <input type="checkbox"/> | Out of Sequence                 |                          |                      |                          |                    |
| <input type="checkbox"/> | Wave/Twist in Tube           | <input type="checkbox"/> | Folio          | <input type="checkbox"/> | Outside Dimensions              |                          |                      |                          |                    |










**D4273-141 BASKET FRAME ASSY. LH**

**RELEASED**  
2012-07-12  
UP

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 EXCEPT FOR XX.XX DIMS:  $\pm 0.06$
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 24.75 lbs
- 8) WELD PER DART QSI 004

|            |   |  |               |
|------------|---|--|---------------|
| DESIGN     | JFH   | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA<br><br>DRAWING NO.<br><b>D4273</b><br><br>TITLE<br><b>BASKET BASE ASSY</b><br><br>COPYRIGHT © 2010 BY DART AEROSPACE LTD<br><small>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> | REV. E        |
| DRAWN      |  |  | SHEET 5 OF 10 |
| CHECKED    |  |  | SCALE         |
| MFG. APPR. |  |  | NTS           |
| APPROVED   |  |  |               |
| DE APPR.   |  |  |               |
| DATE       | 12.06.18  |  |               |

NCR: Yes / No

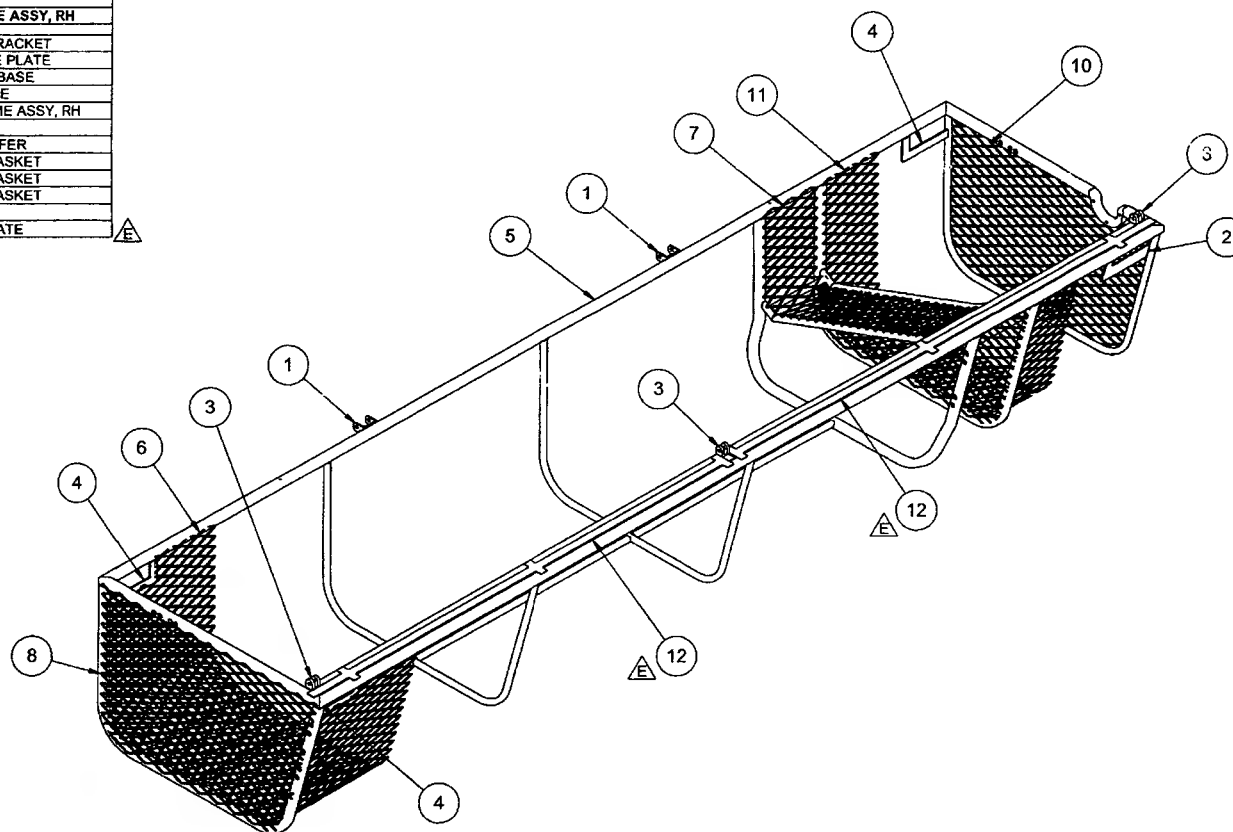
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                   |   |             |              |  |  |   |  |
|--|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |  |  |   |  |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Operator <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Material <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Setup <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Other <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Process <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Supplier <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Training <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |

| ITEM | QTY | P/N       | DESCRIPTION           |
|------|-----|-----------|-----------------------|
|      | X   | D4273-042 | BASKET BASE ASSY, RH  |
| 1    | 2   | D2581     | MOUNTING BRACKET      |
| 2    | 1   | D3813-15  | WIDE HANDLE PLATE     |
| 3    | 3   | D4016-1   | HINGE HALF, BASE      |
| 4    | 3   | D4021-1   | HANDLE PLATE          |
| 5    | 1   | D4273-142 | BASKET FRAME ASSY, RH |
| 6    | 1   | D4279-1   | MESH - BASE           |
| 7    | 1   | D4279-3   | MESH - CHAMFER        |
| 8    | 1   | D4279-5   | END MESH, BASKET      |
| 9    | 2   | D4279-7   | END MESH, BASKET      |
| 10   | 1   | D4279-9   | END MESH, BASKET      |
| 11   | 1   | D4279-11  | MESH - BASE           |
| 12   | 2   | D4672-1   | BLANKING PLATE        |



**D4273-042 BASKET BASE ASSY, RH**  
(MESH SHOWN LOCALLY FOR CLARITY)

**NOTES:**

- 1) MATERIAL: N/A
- 2) FINISH: POWDER COAT WHITE (4.3.5.2) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 45 lbs APPROX
- 8) WELD PER DART QSI 004
- 9) MASK HOLES PRIOR TO POWDER COAT
- 10) TRIM AS NECESSARY TO CLEAR FASTENERS/STRUCTURE.

**RELEASED**  
2012-07-12  
ap

|            |          |   |               |
|------------|----------|---|---------------|
| DESIGN     | JPH      | <b>DART AEROSPACE LTD</b>   |               |
| DRAWN      |          | HAWKESBURY, ONTARIO, CANADA   |               |
| CHECKED    |          | DRAWING NO  | REV. E        |
| MFG. APPR. |          | D4273   | SHEET 6 OF 10 |
| APPROVED   |          | TITLE   | SCALE         |
| DE APPR.   |          | <b>BASKET BASE ASSY</b>   | NTS           |
| DATE       | 12.06.18 | <small>COPYRIGHT © 2010 BY DART AEROSPACE LTD<br/>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR FOR REPRODUCTION OR TRANSMISSION IN ANY FORM OR BY ANY MEANS WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE LTD.</small> |               |

NCR: Yes / No

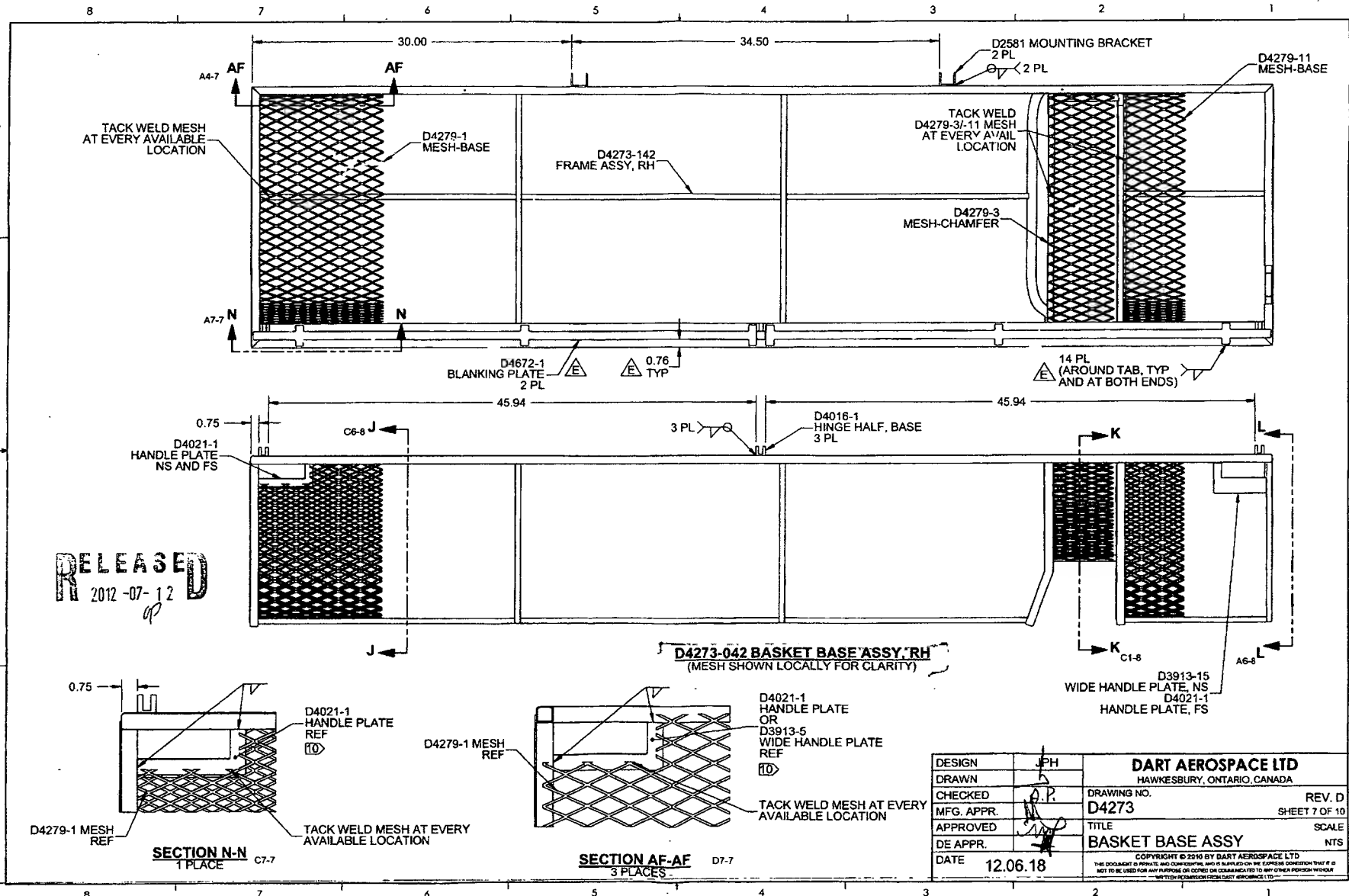
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                   |   |             |              |  |  |   |  |
|--|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |  |  |   |  |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Operator <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Material <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Setup <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Other <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Process <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Supplier <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Training <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |

RELEASED  
2012-07-12



|            |          |  |               |
|------------|----------|--|---------------|
| DESIGN     | JPH      | <b>DART AEROSPACE LTD</b>  |               |
| DRAWN      |          | HAWKESBURY, ONTARIO, CANADA  |               |
| CHECKED    | A.P.     | DRAWING NO. <b>D4273</b>   | REV. D        |
| MFG. APPR. |          |  | SHEET 7 OF 10 |
| APPROVED   |          | TITLE <b>BASKET BASE ASSY</b>  | SCALE         |
| DE APPR.   |          |  | NTS           |
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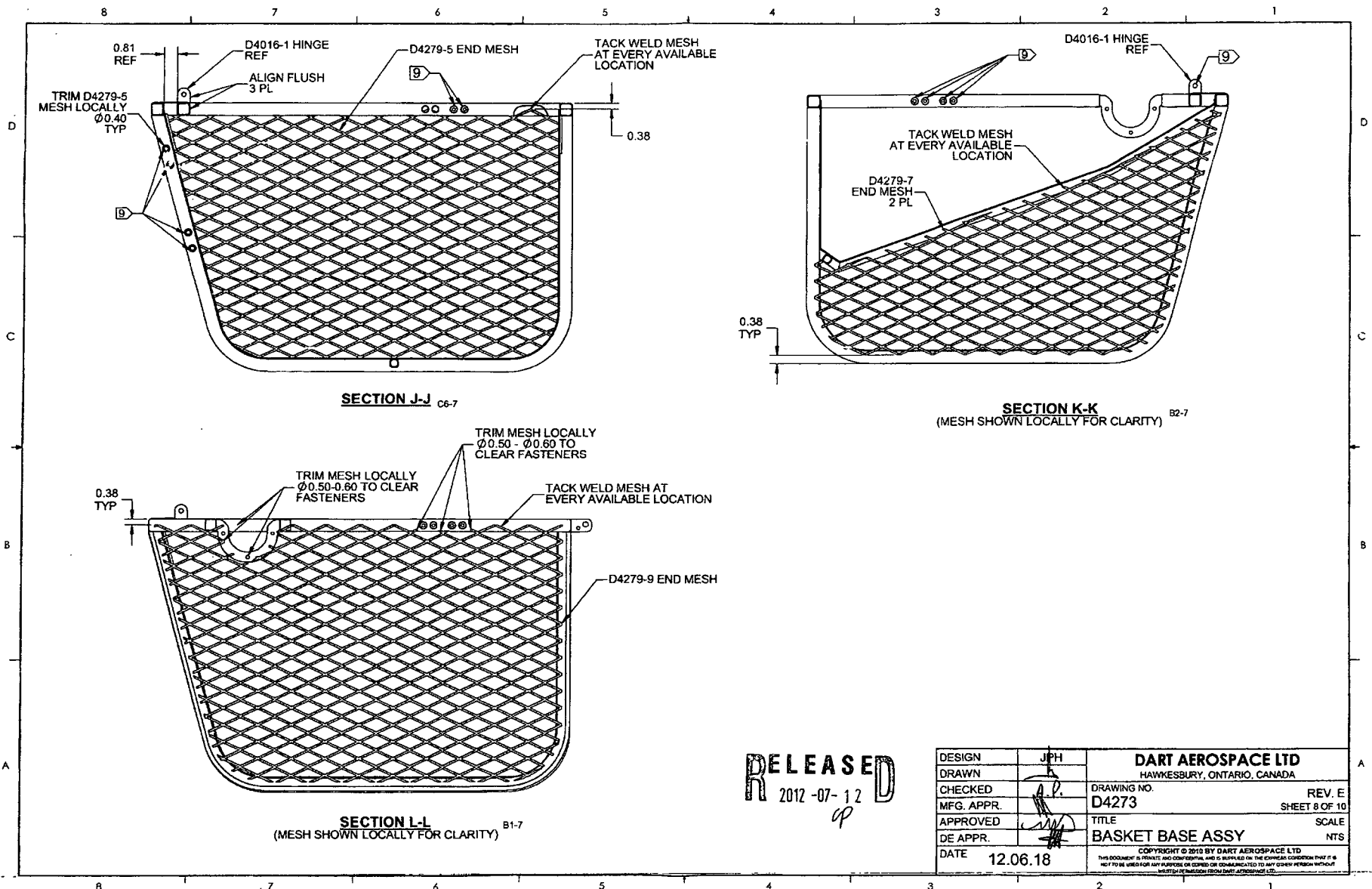
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|   |      |      |   |   |                      |   |                |              |  |  |   |  |
|---|------|------|---|---|----------------------|---|----------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____  |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |  |  |   |  |
| <b>Root Cause</b>   | Date | Step | Qty   | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Operator <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Material <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Setup <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Other <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Process <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Supplier <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Training <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Unapproved <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| <b>FAULT CATEGORY</b>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                      | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |                |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |



RELEASED  
2012-07-12  
CP

|  |          |  |               |
|--|----------|--|---------------|
| DESIGN   | JPH      | DART AEROSPACE LTD                     |               |
| DRAWN  | JPH      | HAWKESBURY, ONTARIO, CANADA            |               |
| CHECKED  | A.P.     | DRAWING NO.                            | REV. E        |
| MFG. APPR.   |          | D4273                                  | SHEET 8 OF 10 |
| APPROVED   |          | TITLE                                  | SCALE         |
| DE APPR.   |          | BASKET BASE ASSY                       | NTS           |
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NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

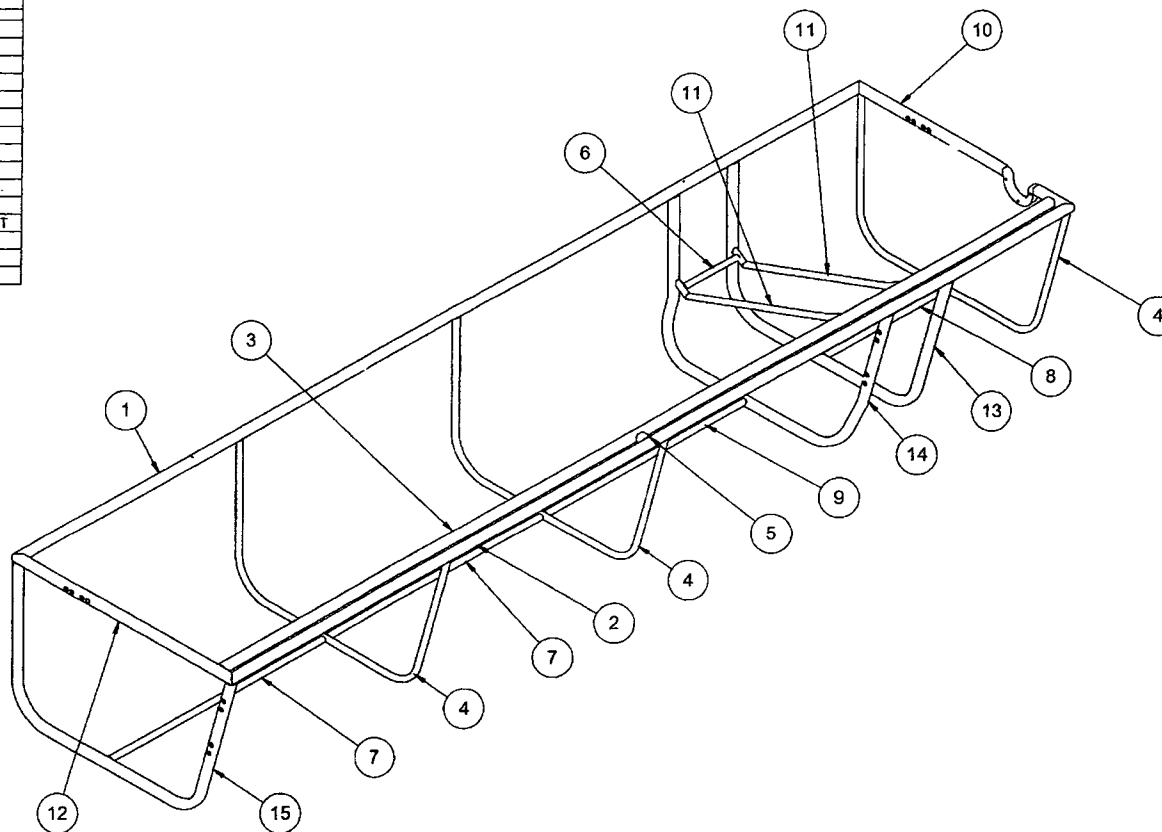
DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|   |      |      |   |   |                      |   |                |              |   |  |  |
|---|------|------|---|---|----------------------|---|----------------|--------------|---|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____  |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |   |  |  |
| <b>Root Cause</b>   | Date | Step | Qty   | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector  |  |  |
| Doc/Data <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Equip/Tooling <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Operator <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Material <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Setup <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Other <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Process <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Supplier <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Training <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Unapproved <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| <b>FAULT CATEGORY</b>   |      |      |   |   |                      |   |                |              |   |  |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                      | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |                |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |  |



| ITEM | QTY | PART NUMBER | DESCRIPTION             |
|------|-----|-------------|-------------------------|
|      | X   | D4273-142   | BASKET FRAME ASSY, RH   |
| 1    | 1   | D3913-1     | RIB                     |
| 2    | 1   | D3913-3     | RIB                     |
| 3    | 1   | D3913-9     | HINGE RIB               |
| 4    | 3   | D3916-5     | LIGHT RIB               |
| 5    | 1   | D4017-7     | RIB                     |
| 6    | 1   | D4277-3     | RIB                     |
| 7    | 2   | D4277-5     | RIB                     |
| 8    | 1   | D4277-9     | RIB                     |
| 9    | 1   | D4277-19    | RIB                     |
| 10   | 1   | D4278-041   | UPPER RIB ASSY-HOOP     |
| 11   | 2   | D4278-345   | RIB ASSY, FWD CHAM      |
| 12   | 1   | D4278-347   | UPPER RIB ASSY-STRAIGHT |
| 13   | 1   | D4306-1     | RIB                     |
| 14   | 1   | D4306-044   | RIB ASSY, RH            |
| 15   | 1   | D4306-045   | RIB ASSY                |



**D4273-142 BASKET FRAME ASSY, RH**

**RELEASED**  
2012-07-12

|            |          |   |               |
|------------|----------|---|---------------|
| DESIGN     | JFH      | <b>DART AEROSPACE LTD</b>   |               |
| DRAWN      |          | HAWKESBURY, ONTARIO, CANADA   |               |
| CHECKED    | AR       | DRAWING NO.   | REV. E        |
| MFG. APPR. |          | <b>D4273</b>  | SHEET 9 OF 10 |
| APPROVED   |          | TITLE   | SCALE         |
| DE APPR.   |          | <b>BASKET BASE ASSY</b>   | NTS           |
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NCR: Yes / No

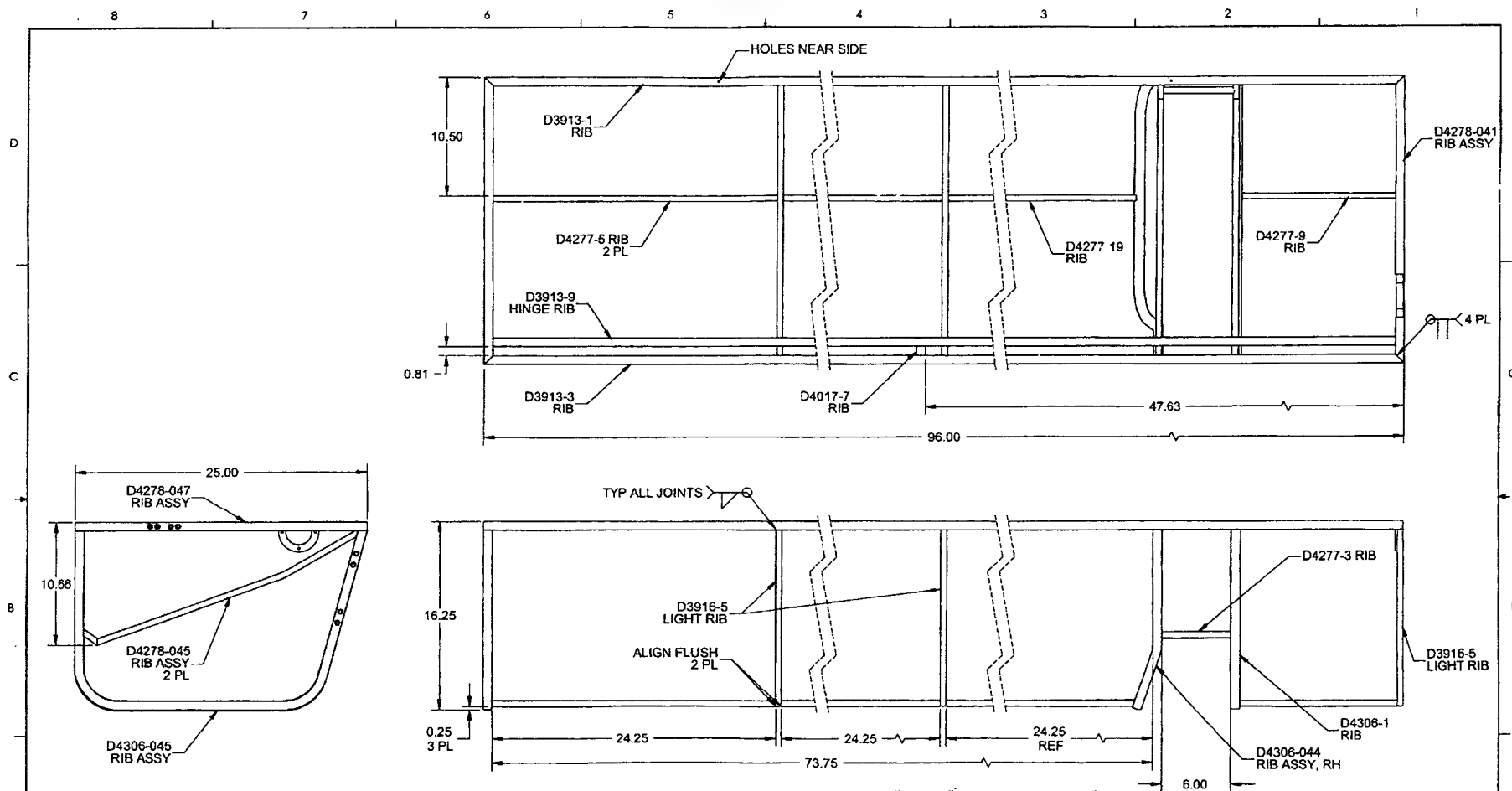
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                   |   |             |              |              |  |  |
|--|------|------|-----|---|-------------------|---|-------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector |  |  |
| Doc/Data   |      |      |     |   |                   |   |             |              |              |  |  |
| Equip/Tooling  |      |      |     |   |                   |   |             |              |              |  |  |
| Operator   |      |      |     |   |                   |   |             |              |              |  |  |
| Material   |      |      |     |   |                   |   |             |              |              |  |  |
| Setup  |      |      |     |   |                   |   |             |              |              |  |  |
| Other  |      |      |     |   |                   |   |             |              |              |  |  |
| Process  |      |      |     |   |                   |   |             |              |              |  |  |
| Supplier   |      |      |     |   |                   |   |             |              |              |  |  |
| Training   |      |      |     |   |                   |   |             |              |              |  |  |
| Unapproved   |      |      |     |   |                   |   |             |              |              |  |  |

| FAULT CATEGORY  |   |  |   |   |  |  |  |  |  |
|---|---|--|---|---|--|--|--|--|--|
| <b>Landing Gear</b>                                   |   |  | <b>General</b>                                |   |  |  |  |  |  |
| <input type="checkbox"/> Bending                      | <input type="checkbox"/> Bend           | <input type="checkbox"/> Grain                           | <input type="checkbox"/> Ovalized             | <input type="checkbox"/> Pressure/Forced    |  |  |  |  |  |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route      | <input type="checkbox"/> Hardware                        | <input type="checkbox"/> Over/Under tolerance | <input type="checkbox"/> Temperature/Cure   |  |  |  |  |  |
| <input type="checkbox"/> Cracks                       | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete           | <input type="checkbox"/> Part Incorrect       | <input type="checkbox"/> Weld               |  |  |  |  |  |
| <input type="checkbox"/> Crushed/Crimped.             | <input type="checkbox"/> Burrs          | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing    | <input type="checkbox"/> Wrong Stock Pulled |  |  |  |  |  |
| <input type="checkbox"/> Cuffs                        | <input type="checkbox"/> Contamination  | <input type="checkbox"/> Maintenance                     | <input type="checkbox"/> Part Moved           |   |  |  |  |  |  |
| <input type="checkbox"/> Heat Treat                   | <input type="checkbox"/> Countersink    | <input type="checkbox"/> Mislabeled                      | <input type="checkbox"/> Positioned Wrong     |   |  |  |  |  |  |
| <input type="checkbox"/> Inspection Strip in Tube     | <input type="checkbox"/> Cut Too Short  | <input type="checkbox"/> Misread                         | <input type="checkbox"/> Power Loss/Surge     | <input type="checkbox"/> Other              |  |  |  |  |  |
| <input type="checkbox"/> Ripples in Bend              | <input type="checkbox"/> Drill Holes    | <input type="checkbox"/> Offset                          |   |   |  |  |  |  |  |
| <input type="checkbox"/> Torque Waves in Extrusion    | <input type="checkbox"/> Drawing        | <input type="checkbox"/> Out of Calibration              |   |   |  |  |  |  |  |
| <input type="checkbox"/> Turning Sequence             | <input type="checkbox"/> Finish         | <input type="checkbox"/> Out of Sequence                 |   |   |  |  |  |  |  |
| <input type="checkbox"/> Wave/Twist in Tube           | <input type="checkbox"/> Folio          | <input type="checkbox"/> Outside Dimensions              |   |   |  |  |  |  |  |



# NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 EXCEPT FOR XX.XX DIMS:  $\pm 0.06$
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 24.77 lbs
- 8) WELD PER DART QSI 004

## D4273-142 BASKET FRAME ASSY, RH

RELEASED  
2012-07-12  
4P

|   |          |  |                |
|---|----------|--|----------------|
| DESIGN  | JPH      | DART AEROSPACE LTD                     |                |
| DRAWN   |          | HAWKESBURY, ONTARIO, CANADA            |                |
| CHECKED   |          | DRAWING NO.                            | REV. E         |
| MFG. APPR.  |          | D4273                                  | SHEET 10 OF 10 |
| APPROVED  |          | TITLE                                  | SCALE          |
| DE APPR.  |          | BASKET BASE ASSY                       | NTS            |
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NCR: Yes / No

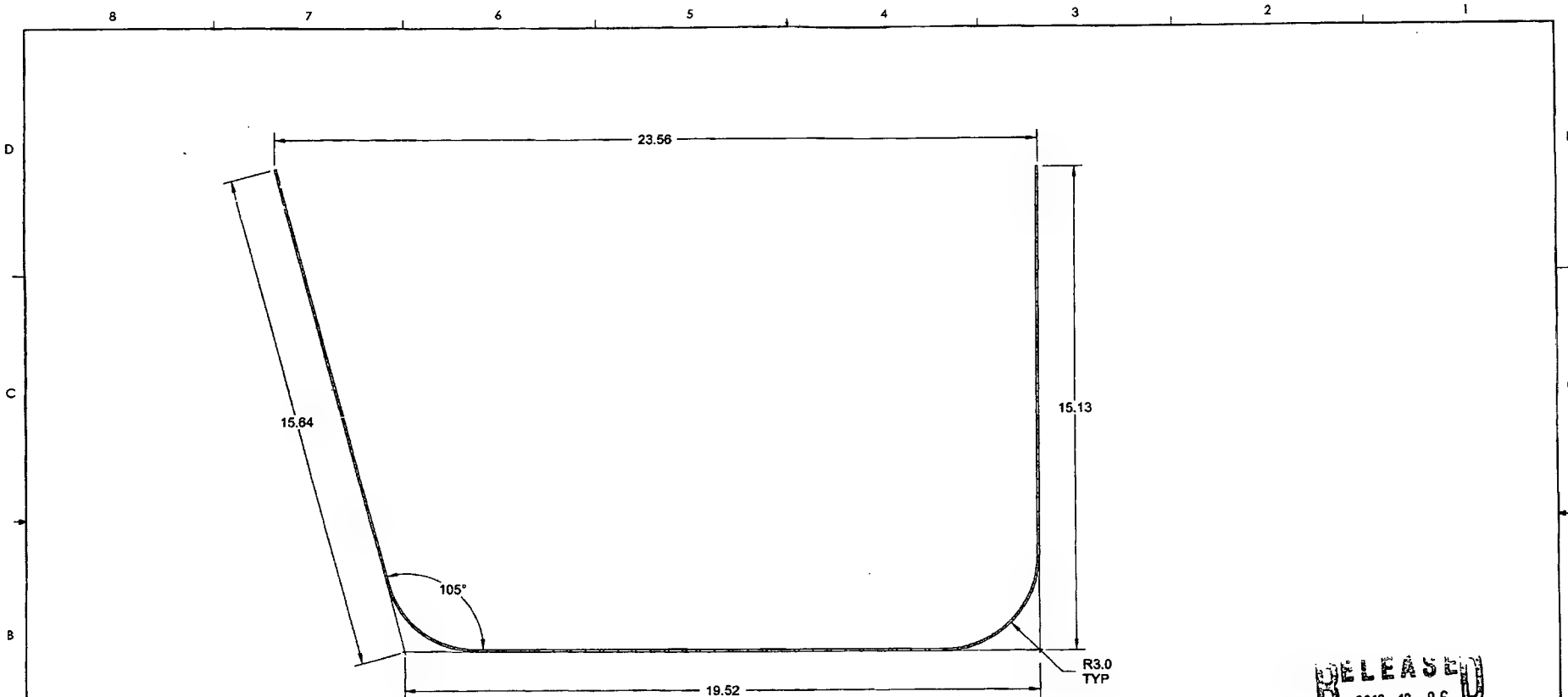
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                   |   |             |              |              |  |  |
|--|------|------|-----|---|-------------------|---|-------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector |  |  |
| Doc/Data   |      |      |     |   |                   |   |             |              |              |  |  |
| Equip/Tooling  |      |      |     |   |                   |   |             |              |              |  |  |
| Operator   |      |      |     |   |                   |   |             |              |              |  |  |
| Material   |      |      |     |   |                   |   |             |              |              |  |  |
| Setup  |      |      |     |   |                   |   |             |              |              |  |  |
| Other  |      |      |     |   |                   |   |             |              |              |  |  |
| Process  |      |      |     |   |                   |   |             |              |              |  |  |
| Supplier   |      |      |     |   |                   |   |             |              |              |  |  |
| Training   |      |      |     |   |                   |   |             |              |              |  |  |
| Unapproved   |      |      |     |   |                   |   |             |              |              |  |  |

| FAULT CATEGORY           |                              |                          |                |                          |                                 |                          |                      |                          |                    |
|--------------------------|------------------------------|--------------------------|----------------|--------------------------|---------------------------------|--------------------------|----------------------|--------------------------|--------------------|
| <b>Landing Gear</b>      |                              |                          | <b>General</b> |                          |                                 |                          |                      |                          |                    |
| <input type="checkbox"/> | Bending                      | <input type="checkbox"/> | Bend           | <input type="checkbox"/> | Grain                           | <input type="checkbox"/> | Ovalized             | <input type="checkbox"/> | Pressure/Forced    |
| <input type="checkbox"/> | Centre Not Concentric to O/S | <input type="checkbox"/> | BOM/Route      | <input type="checkbox"/> | Hardware                        | <input type="checkbox"/> | Over/Under tolerance | <input type="checkbox"/> | Temperature/Cure   |
| <input type="checkbox"/> | Cracks                       | <input type="checkbox"/> | Broken/Damaged | <input type="checkbox"/> | Inspection Incomplete           | <input type="checkbox"/> | Part Incorrect       | <input type="checkbox"/> | Weld               |
| <input type="checkbox"/> | Crushed/Crimped              | <input type="checkbox"/> | Burrs          | <input type="checkbox"/> | Instructions Incomplete/Unclear | <input type="checkbox"/> | Part Lost/Missing    | <input type="checkbox"/> | Wrong Stock Pulled |
| <input type="checkbox"/> | Cuffs                        | <input type="checkbox"/> | Contamination  | <input type="checkbox"/> | Maintenance                     | <input type="checkbox"/> | Part Moved           | <input type="checkbox"/> | Other              |
| <input type="checkbox"/> | Heat Treat                   | <input type="checkbox"/> | Countersink    | <input type="checkbox"/> | Mislabeled                      | <input type="checkbox"/> | Positioned Wrong     |                          |                    |
| <input type="checkbox"/> | Inspection Strip in Tube     | <input type="checkbox"/> | Cut Too Short  | <input type="checkbox"/> | Misread                         | <input type="checkbox"/> | Power Loss/Surge     |                          |                    |
| <input type="checkbox"/> | Ripples in Bend              | <input type="checkbox"/> | Drill Holes    | <input type="checkbox"/> | Offset                          |                          |                      |                          |                    |
| <input type="checkbox"/> | Torque Waves in Extrusion    | <input type="checkbox"/> | Drawing        | <input type="checkbox"/> | Out of Calibration              |                          |                      |                          |                    |
| <input type="checkbox"/> | Turning Sequence             | <input type="checkbox"/> | Finish         | <input type="checkbox"/> | Out of Sequence                 |                          |                      |                          |                    |
| <input type="checkbox"/> | Wave/Twist in Tube           | <input type="checkbox"/> | Folio          | <input type="checkbox"/> | Outside Dimensions              |                          |                      |                          |                    |



**D4279-1 MESH - BASE**

*W/D 8787*

**RELEASED**  
2010-12-06  
*W/D*

**NOTES:**

- 1) MATERIAL: MAKE FROM D4279-1F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: SEE D4279-1F
- 8) PRE-FORMING OF MESH PER SHOP OPTION, THIS VIEW MAY BE USED FOR REF ONLY.

|            |   |  |              |
|------------|---|--|--------------|
| B          | -3F: 6.50 WAS 20.00 (B5-4); REDESIGN -9 (SHT 7); ADD -11/-11F (SHT 8/9), 48.0 WAS 50.50 (C2-2, C7-9), CUTOUTS ON -9 NOW TRIMMED ON INSTALL (A6-6) | CP   | 10.11.30     |
| A          | NEW ISSUE   | SC   | 10.11.25     |
| REV.       | DESCRIPTION   | BY   | DATE         |
| DESIGN     | JPH   | <b>DART AEROSPACE LTD</b><br>HAWKESBURY, ONTARIO, CANADA   |              |
| DRAWN      | <i>[Signature]</i>  |  |              |
| CHECKED    | <i>[Signature]</i>  | DRAWING NO.  | REV. B       |
| MFG. APPR. | <i>[Signature]</i>  | D4279  | SHEET 1 OF 9 |
| APPROVED   | <i>[Signature]</i>  | TITLE  | SCALE        |
| DE APPR.   | <i>[Signature]</i>  | MESH - BASKET  | NTS          |
| DATE       | 10.11.30  | COPYRIGHT © 2010 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESSED CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR REPRODUCED IN ANY FORM OR BY ANY MEANS WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD. |              |

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                      |   |                |              |   |  |  |
|--|------|------|---|---|----------------------|---|----------------|--------------|---|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |   |  |  |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector  |  |  |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Operator <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Material <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Setup <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Other <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Process <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Supplier <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Training <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                      |   |                |              |   |  |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                      | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |                |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |  |



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

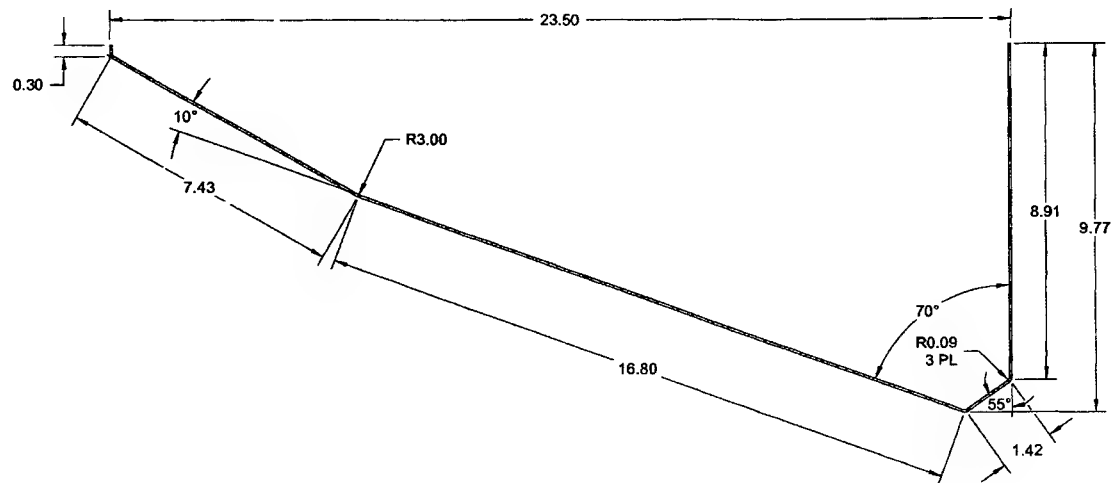
DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                   |   |             |              |              |  |  |
|--|------|------|-----|---|-------------------|---|-------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector |  |  |
| Doc/Data <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Equip/Tooling <input type="checkbox"/>                       |      |      |     |   |                   |   |             |              |              |  |  |
| Operator <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Material <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Setup <input type="checkbox"/>                               |      |      |     |   |                   |   |             |              |              |  |  |
| Other <input type="checkbox"/>                               |      |      |     |   |                   |   |             |              |              |  |  |
| Process <input type="checkbox"/>                             |      |      |     |   |                   |   |             |              |              |  |  |
| Supplier <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Training <input type="checkbox"/>                            |      |      |     |   |                   |   |             |              |              |  |  |
| Unapproved <input type="checkbox"/>                          |      |      |     |   |                   |   |             |              |              |  |  |

| FAULT CATEGORY  |   |  |   |   |  |  |  |  |  |
|---|---|--|---|---|--|--|--|--|--|
| <b>Landing Gear</b>                                   |   |  | <b>General</b>                                |   |  |  |  |  |  |
| <input type="checkbox"/> Bending                      | <input type="checkbox"/> Bend           | <input type="checkbox"/> Grain                           | <input type="checkbox"/> Ovalized             | <input type="checkbox"/> Pressure/Forced    |  |  |  |  |  |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route      | <input type="checkbox"/> Hardware                        | <input type="checkbox"/> Over/Under tolerance | <input type="checkbox"/> Temperature/Cure   |  |  |  |  |  |
| <input type="checkbox"/> Cracks                       | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete           | <input type="checkbox"/> Part Incorrect       | <input type="checkbox"/> Weld               |  |  |  |  |  |
| <input type="checkbox"/> Crushed/Crimped.             | <input type="checkbox"/> Burrs          | <input type="checkbox"/> Instructions Incomplete/Unclear | <input type="checkbox"/> Part Lost/Missing    | <input type="checkbox"/> Wrong Stock Pulled |  |  |  |  |  |
| <input type="checkbox"/> Cuffs                        | <input type="checkbox"/> Contamination  | <input type="checkbox"/> Maintenance                     | <input type="checkbox"/> Part Moved           |   |  |  |  |  |  |
| <input type="checkbox"/> Heat Treat                   | <input type="checkbox"/> Countersink    | <input type="checkbox"/> Mislabeled                      | <input type="checkbox"/> Positioned Wrong     |   |  |  |  |  |  |
| <input type="checkbox"/> Inspection Strip in Tube     | <input type="checkbox"/> Cut Too Short  | <input type="checkbox"/> Misread                         | <input type="checkbox"/> Power Loss/Surge     | <input type="checkbox"/> Other              |  |  |  |  |  |
| <input type="checkbox"/> Ripples in Bend              | <input type="checkbox"/> Drill Holes    | <input type="checkbox"/> Offset                          |   |   |  |  |  |  |  |
| <input type="checkbox"/> Torque Waves in Extrusion    | <input type="checkbox"/> Drawing        | <input type="checkbox"/> Out of Calibration              |   |   |  |  |  |  |  |
| <input type="checkbox"/> Turning Sequence             | <input type="checkbox"/> Finish         | <input type="checkbox"/> Out of Sequence                 |   |   |  |  |  |  |  |
| <input type="checkbox"/> Wave/Twist in Tube           | <input type="checkbox"/> Folio          | <input type="checkbox"/> Outside Dimensions              |   |   |  |  |  |  |  |





**D4279-3 MESH-CHAMFER**

**RELEASED**  
2010-12-06

**NOTES:**

- 1) MATERIAL: MAKE FROM D4279-3F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 EXCEPT ON XX.XX DIMS  $\pm 0.06$ .
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: SEE D4279-3F
- 8) PRE-FORMING OF MESH PER SHOP OPTION, THIS VIEW MAY BE USED FOR REF ONLY.

|  |                    |  |              |
|--|--------------------|--|--------------|
| DESIGN   | JPH                | <b>DART AEROSPACE LTD</b>              |              |
| DRAWN  |                    | HAWKESBURY, ONTARIO, CANADA            |              |
| CHECKED  | <i>[Signature]</i> | DRAWING NO.                            | REV. B       |
| MFG. APPR.   | <i>[Signature]</i> | D4279                                  | SHEET 3 OF 9 |
| APPROVED   | <i>[Signature]</i> | TITLE                                  | SCALE        |
| DE APPR.   | <i>[Signature]</i> | MESH - BASKET                          | NTS          |
| DATE   | 10.11.30           | COPYRIGHT © 2010 BY DART AEROSPACE LTD |              |
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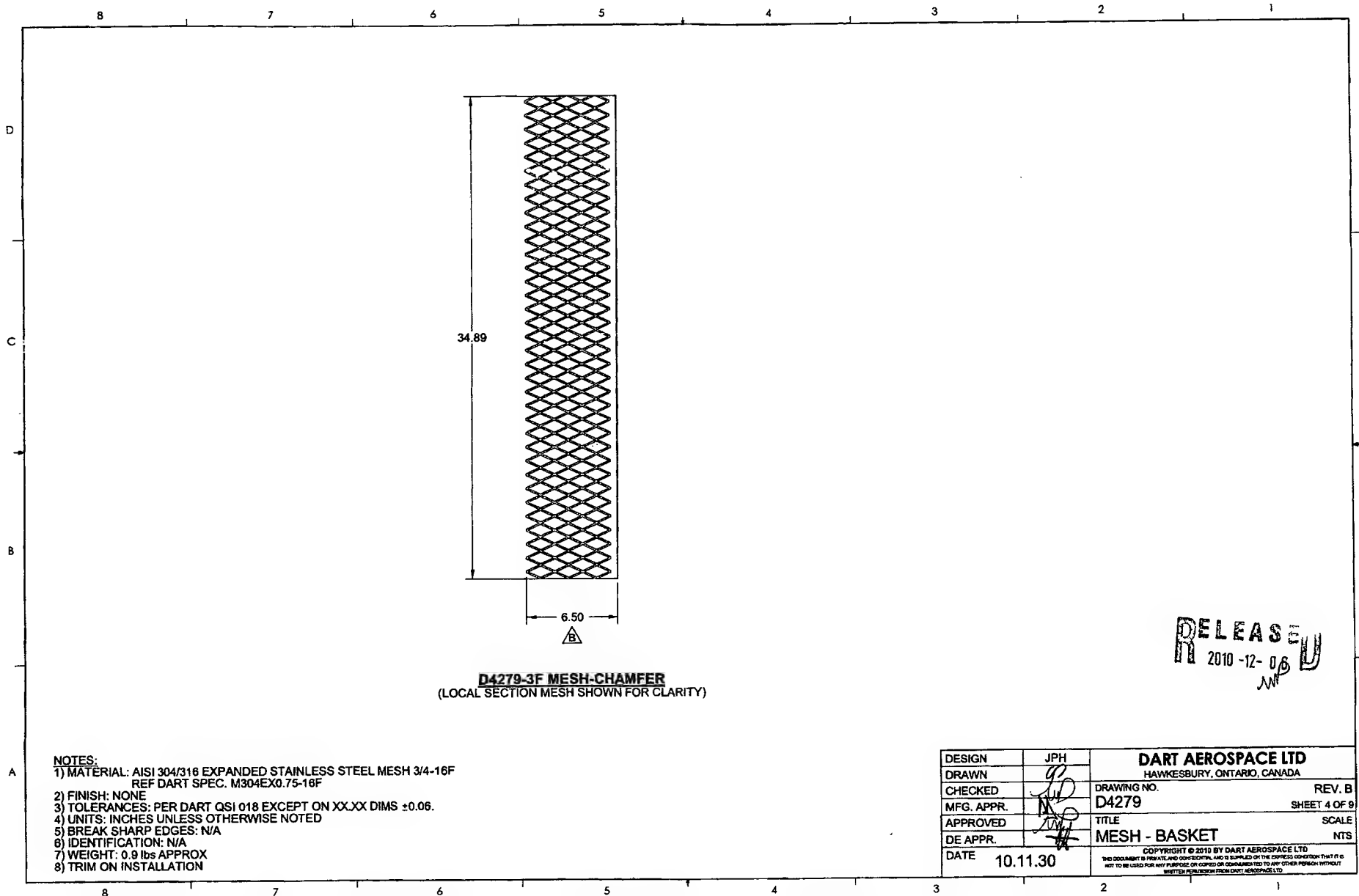
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                   |   |             |              |  |  |   |  |
|--|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |  |  |   |  |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Operator <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Material <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Setup <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Other <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Process <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Supplier <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Training <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |



**D4279-3F MESH-CHAMFER**  
(LOCAL SECTION MESH SHOWN FOR CLARITY)

RELEASE  
2010-12-08  
JMS

**NOTES:**

- 1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F  
REF DART SPEC. M304EX0.75-16F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 EXCEPT ON XX.XX DIMS  $\pm 0.06$ .
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 0.9 lbs APPROX
- 8) TRIM ON INSTALLATION

|            |                    |   |        |
|------------|--------------------|---|--------|
| DESIGN     | JPH                | <b>DART AEROSPACE LTD</b>   |        |
| DRAWN      | <i>[Signature]</i> | HAWKESBURY, ONTARIO, CANADA   |        |
| CHECKED    | <i>[Signature]</i> | DRAWING NO.<br><b>D4279</b>   | REV. B |
| MFG. APPR. | <i>[Signature]</i> | SHEET 4 OF 9  |        |
| APPROVED   | <i>[Signature]</i> | TITLE   | SCALE  |
| DE APPR.   | <i>[Signature]</i> | <b>MESH - BASKET</b>  | NTS    |
| DATE       | <b>10.11.30</b>    | <small>COPYRIGHT © 2010 BY DART AEROSPACE LTD<br/>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR TRANSMITTED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD</small> |        |

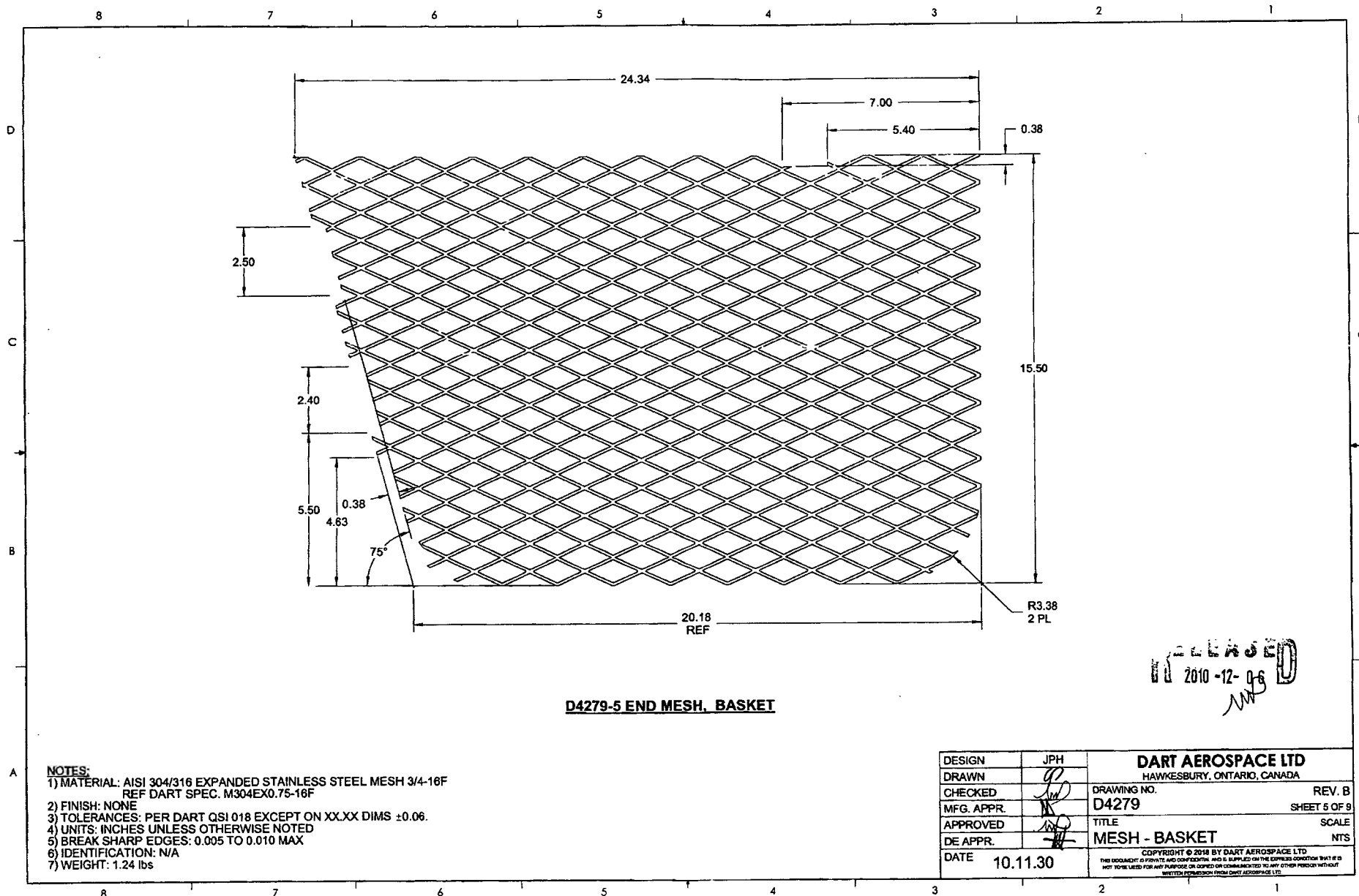
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                      |   |                |              |  |  |   |  |
|--|------|------|---|---|----------------------|---|----------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |  |  |   |  |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Operator <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Material <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Setup <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Other <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Process <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Supplier <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Training <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                      | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |                |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |



NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|   |      |      |   |   |                      |   |                |              |   |  |  |
|---|------|------|---|---|----------------------|---|----------------|--------------|---|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____  |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |   |  |  |
| <b>Root Cause</b>   | Date | Step | Qty   | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector  |  |  |
| Doc/Data <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Equip/Tooling <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Operator <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Material <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Setup <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Other <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Process <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |   |  |  |
| Supplier <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Training <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| Unapproved <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |   |  |  |
| <b>FAULT CATEGORY</b>   |      |      |   |   |                      |   |                |              |   |  |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                      | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |                |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |  |



RELEASE  
2010-12-06  
AMP



|            |                    |   |              |
|------------|--------------------|---|--------------|
| DESIGN     | JPH                | <b>DART AEROSPACE LTD</b>   |              |
| DRAWN      | <i>[Signature]</i> | HAWKESBURY, ONTARIO, CANADA   |              |
| CHECKED    | <i>[Signature]</i> | DRAWING NO.   | REV. 1       |
| MFG. APPR. | <i>[Signature]</i> | <b>D4279</b>  | SHEET 6 OF 6 |
| APPROVED   | <i>[Signature]</i> | TITLE   | SCALE        |
| DE APPR.   | <i>[Signature]</i> | <b>MESH - BASKET</b>  | NTS          |
| DATE       | <b>10.11.30</b>    | COPYRIGHT © 2010 BY DART AEROSPACE LTD<br>THIS DOCUMENT IS PROVIDED AS IS AND IS SUPPLIED ON THE EXPRESS UNDERSTANDING THAT IT IS NOT TO BE USED FOR ANY PURPOSES OR COPIED OR REPRODUCED TO ANY OTHER PERSON WITHOUT THE WRITTEN PERMISSION OF DART AEROSPACE LTD. |              |

NCR: Yes / No

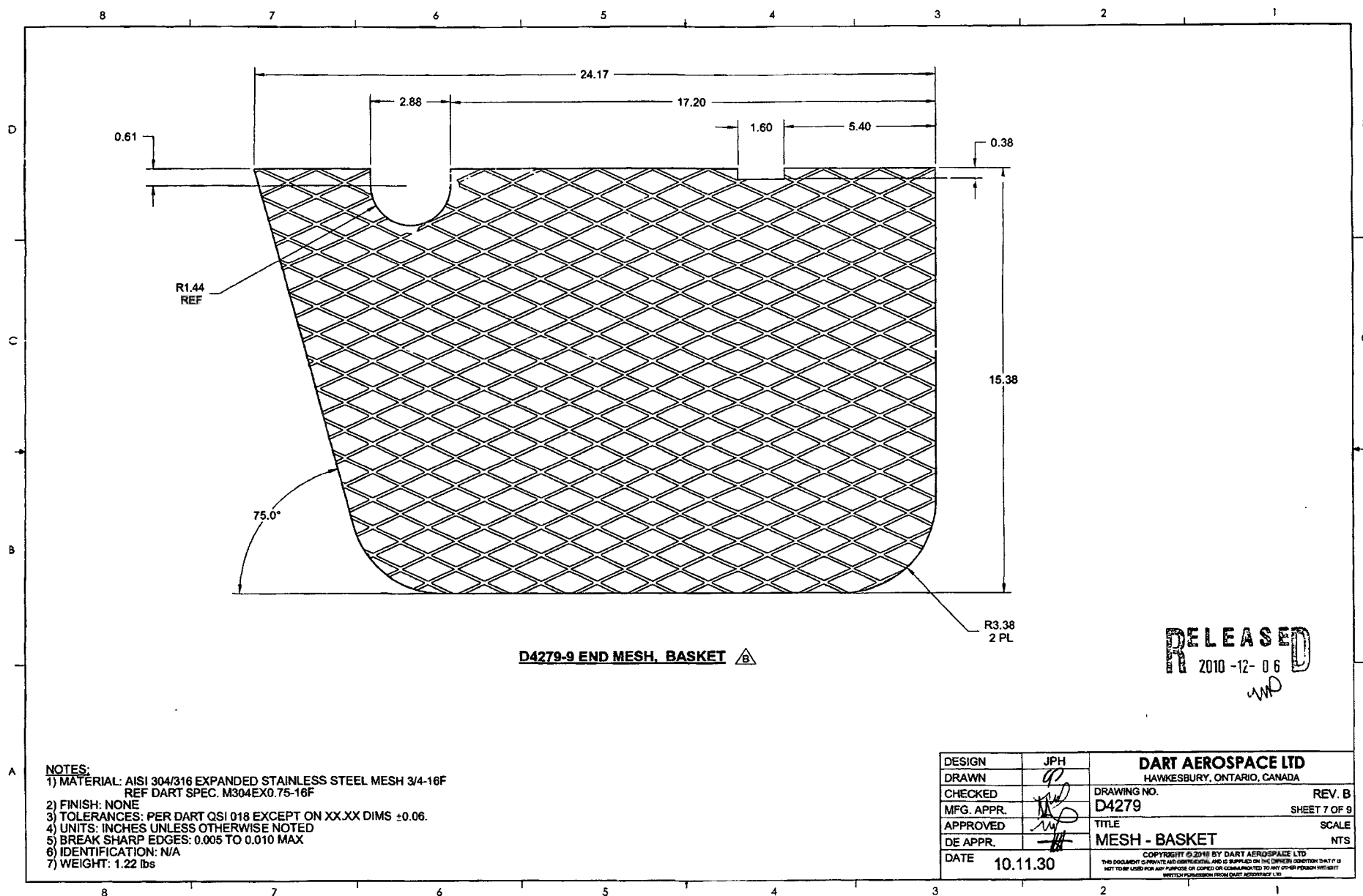
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                   |   |             |              |  |  |   |  |
|--|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |  |  |   |  |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Operator <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Material <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Setup <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Other <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Process <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Supplier <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Training <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |





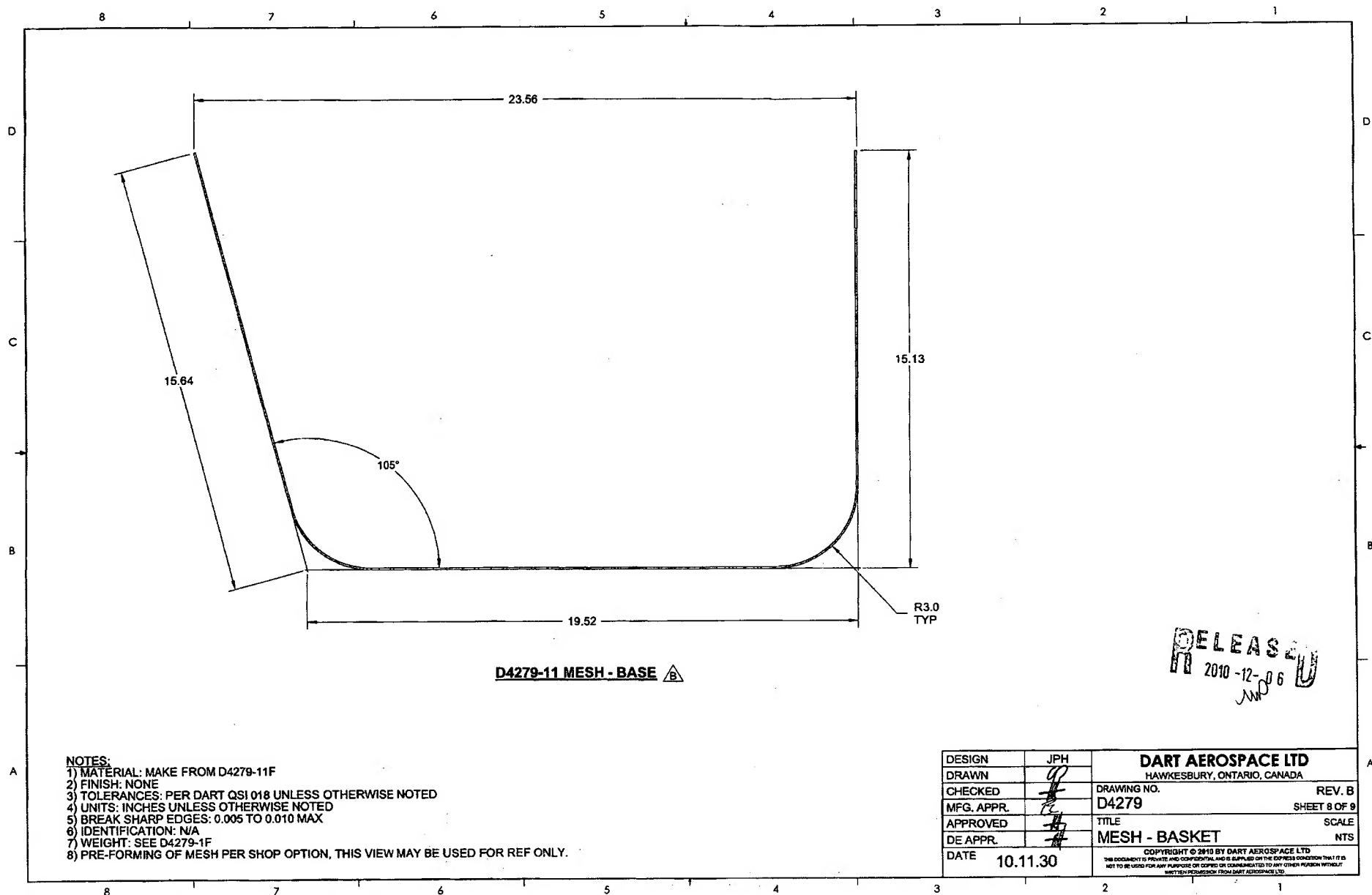
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|   |      |      |   |   |                   |   |             |              |  |  |   |  |
|---|------|------|---|---|-------------------|---|-------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____  |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                   | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |             |              |  |  |   |  |
| <b>Root Cause</b>   | Date | Step | Qty   | Description of work order update or Non-conformance   | Initial Chief Eng | Action Description  | Sign & Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Operator <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Material <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Setup <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Other <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Process <input type="checkbox"/>  |      |      |   |   |                   |   |             |              |  |  |   |  |
| Supplier <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Training <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| Unapproved <input type="checkbox"/>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>FAULT CATEGORY</b>   |      |      |   |   |                   |   |             |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                   | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |             |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |



**RELEASED**  
 2010-12-06

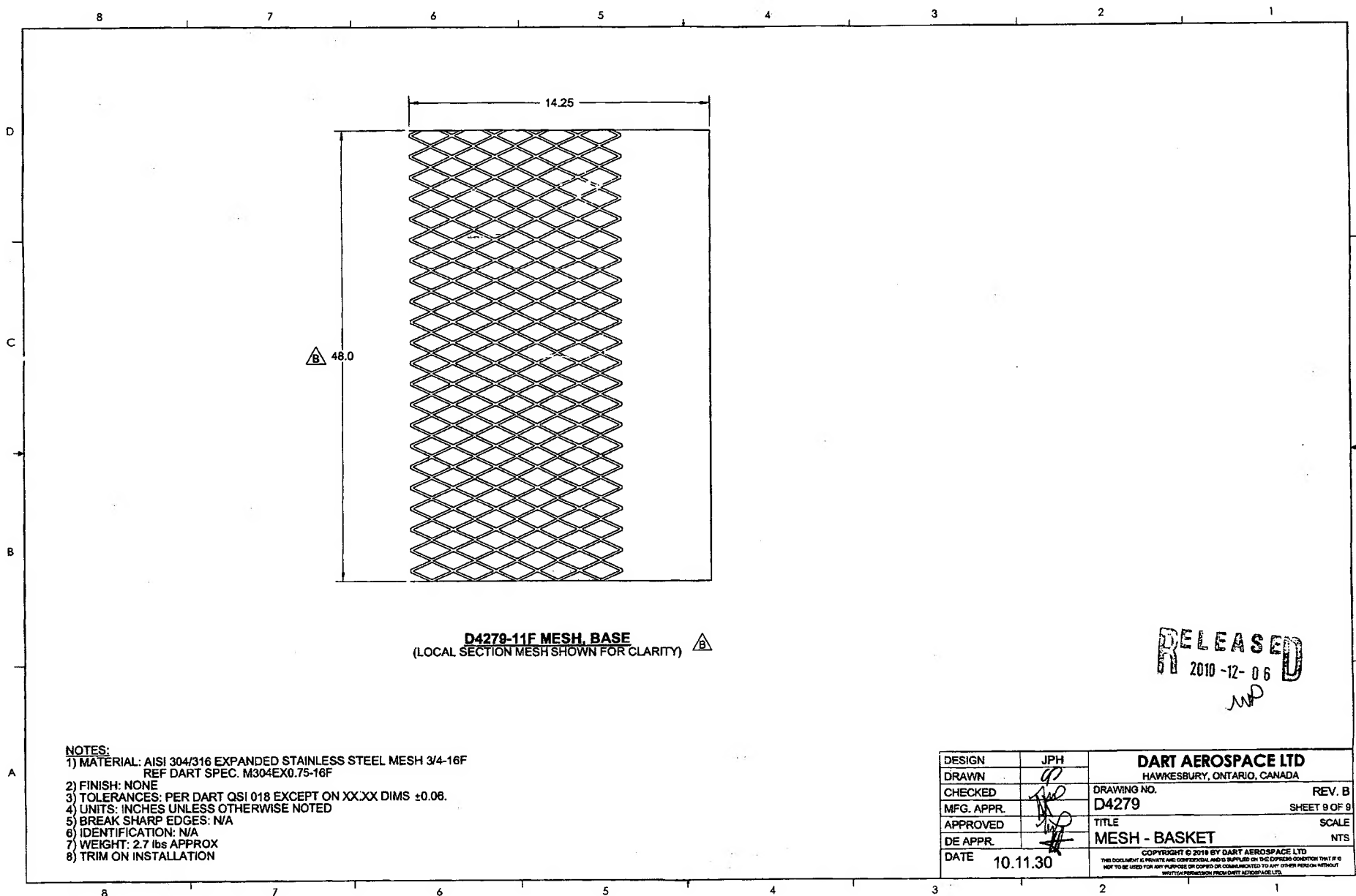
NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |   |   |                      |   |                |              |  |  |   |  |
|--|------|------|---|---|----------------------|---|----------------|--------------|--|--|---|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |      |      |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |  |  |   |  |
| <b>Root Cause</b>  | Date | Step | Qty   | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector   |  |   |  |
| Doc/Data <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Equip/Tooling <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Operator <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Material <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Setup <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Other <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Process <input type="checkbox"/>   |      |      |   |   |                      |   |                |              |  |  |   |  |
| Supplier <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Training <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| Unapproved <input type="checkbox"/>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| <b>FAULT CATEGORY</b>  |      |      |   |   |                      |   |                |              |  |  |   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |      |      | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                      | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions   |                |              | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |  |



**D4279-11F MESH, BASE**  
(LOCAL SECTION MESH SHOWN FOR CLARITY)

RELEASED  
2010-12-06  
MD

**NOTES:**

- 1) MATERIAL: AISI 304/316 EXPANDED STAINLESS STEEL MESH 3/4-16F  
REF DART SPEC. M304EX0.75-16F
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 EXCEPT ON XX.XX DIMS  $\pm 0.06$ .
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: 2.7 lbs APPROX
- 8) TRIM ON INSTALLATION

|            |          |  |              |
|------------|----------|--|--------------|
| DESIGN     | JPH      | <b>DART AEROSPACE LTD</b>  |              |
| DRAWN      | JP       | HAWKESBURY, ONTARIO, CANADA  |              |
| CHECKED    | JP       | DRAWING NO.  | REV. B       |
| MFG. APPR. | JP       | D4279  | SHEET 9 OF 9 |
| APPROVED   | JP       | TITLE  | SCALE        |
| DE APPR.   | JP       | MESH - BASKET  | NTS          |
| DATE       | 10.11.30 | <small>COPYRIGHT © 2018 BY DART AEROSPACE LTD<br/>THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS<br/>NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT<br/>WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small> |              |

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |      |      |     |   |                      |   |                |              |              |  |  |
|--|------|------|-----|---|----------------------|---|----------------|--------------|--------------|--|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ |      |      |     | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                      | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/><br/>           Machining <input type="checkbox"/><br/>           Thermoforming <input type="checkbox"/><br/>           Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/><br/>           Small Fab <input type="checkbox"/><br/>           Finishing <input type="checkbox"/><br/>           Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/><br/>           Prod. Eng. Coord. <input type="checkbox"/><br/>           Rec/Store/Packaging <input type="checkbox"/><br/>           Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/><br/>           Quality <input type="checkbox"/><br/>           Other <input type="checkbox"/> </div> </div> |                |              |              |  |  |
| <b>Root Cause</b>  | Date | Step | Qty | Description of work order update<br>or Non-conformance  | Initial<br>Chief Eng | Action<br>Description   | Sign &<br>Date | Verification | QC Inspector |  |  |
| Doc/Data <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Equip/Tooling <input type="checkbox"/>                       |      |      |     |   |                      |   |                |              |              |  |  |
| Operator <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Material <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Setup <input type="checkbox"/>                               |      |      |     |   |                      |   |                |              |              |  |  |
| Other <input type="checkbox"/>                               |      |      |     |   |                      |   |                |              |              |  |  |
| Process <input type="checkbox"/>                             |      |      |     |   |                      |   |                |              |              |  |  |
| Supplier <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Training <input type="checkbox"/>                            |      |      |     |   |                      |   |                |              |              |  |  |
| Unapproved <input type="checkbox"/>                          |      |      |     |   |                      |   |                |              |              |  |  |

| FAULT CATEGORY  |  |  |   |  |  |   |  |  |  |  |   |
|---|--|--|---|--|--|---|--|--|--|--|---|
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |  |  | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |  |  | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions |  |  | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge |  | <input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><input type="checkbox"/> Other |